

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000001524

FILED  
Feb 01, 2007  
Secretary of State

Entity Name: FL SPECIALTY OPERATIONS LLC

**Current Principal Place of Business:**

112 WEST 34TH STREET  
NEW YORK, NY 10120

**New Principal Place of Business:**

**Current Mailing Address:**

112 WEST 34TH STREET  
NEW YORK, NY 10120

**New Mailing Address:**

FEI Number: 20-0991731

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BROWN, PETER D  
Address: 112 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10120

Title: MGR ( ) Delete  
Name: MCHUGH, ROBERT W  
Address: 112 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10120

Title: MGR ( ) Delete  
Name: BERK, JEFFREY L  
Address: 112 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10120

Title: MGR ( ) Delete  
Name: CLARKE, SHEILAGH M  
Address: 112 WEST 34TH STREET  
City-St-Zip: NEW YORK, NY 10120

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SHEILAGH CLARKE

MGR

02/01/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date