

**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 30, 2007 08:00 AM
Secretary of State

DOCUMENT # M04000003296

1. Entity Name
QRS 11-12 (FL), LLC



Principal Place of Business
50 ROCKEFELLER PLAZA, 2ND FLOOR
NEW YORK, NY 10020

Mailing Address
50 ROCKEFELLER PLAZA, 2ND FLOOR
NEW YORK, NY 10020



01172007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1440340

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$5.00** Additional
Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	W. P. CAREY & CO. LLC
STREET ADDRESS	50 ROCKEFELLER PLAZA, 2ND FLOOR
CITY- ST- ZIP	NEW YORK, NY 10020

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05/15/07-80099-002 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

By: W.P. Carey & Co. LLC

BY: W.P. CAREY & CO. LLC, MGR

BY: ANSON S. WONG, ASSISTANT TREASURER

SIGNATURE: *By: Anson Wong, Assistant Treasurer*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

212-492-1100

4/24/2007