

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 28, 2006 08:00 AM
Secretary of State

DOCUMENT # M04000003343

1. Entity Name
QRS 10-18 (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

DO NOT WRITE IN THIS SPACE



03232006No Chg-LLC

CR2E083 (11/05)

4. FEI Number
20-1418003

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, 2006**

U00000542686
05/10/06-80107-019 50.00

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

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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CITY-ST-ZIP	

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IN THIS SPACE**

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.

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

ANSON S. WONG, ASSISTANT TREASURER

4/20/2006

Date

212-492-1100

Daytime Phone #