2006 LIMITED LIABILITY COMPANY

, ANNUAL REPORT				Apr 28, 2006 08:00 A	
DOCU 1. Entity Nam	MENT # M0400	0003657		Secretary of State	
PRUDEN	ITIAL - MW III LLC				
8 CAMPUS D	ce of Business ORIVE, 4TH FLOOR Y, NY 07054	Mailing Address 8 CAMPUS DRIVE, 4TH FLOOR PARSIPPANY, NY 07054			BB # 5
DO NOT WRITE IN THIS SPAC				02062006 No Chg-LLC	:R2E083 (11/05)
			CE	4. FEI Number NOT APPLICABLE 5. Codifficite of Course Building 6. Codifficite of Course Building 7. Codifficite Building 7. Codifficite Building 7. Codifficite Building 8. Codifficite Build	Applied For Not Applicable
	6. Name and Address of C	urrent Registered Agent	<u>. </u>	5. Certificate of Status Desired	Fee Required
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324			DO NOT WRITE IN THIS SPACE		
	tions of registered agent.	ment for the purpose of changing its registers red agent and title if applicable. (NOTE Registers	ed office or register		I am familiar with, and accept
Filing Fee is \$50.00 Due by May 1, 2006			U00000\$42256 05/10/06-80091-00\$ 50.00		
9.	MANAGING	MEMBERS/MANAGERS	<u> </u>		
TITLE NAME. STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR THE PRUDENTIAL INSUF 8 CAMPUS DRIVE, 4TH F PARSIPPANY, NY 07054	RANCE COMPANY OF AMERIC LOOR			
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS		DO NOT WRITE IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE NAME					

11. I hereby certify that the information supplied with this filling 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 eath; that I am a managing member or manager of the limited fliability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

STREET ADDRESS CHY-ST-ZIP

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