

**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**DOCUMENT # M04000003953**

1. Entity Name  
NP/I&G RIVERPLACE, LLC



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 MAY -1 AM 9:15

Principal Place of Business  
420 LEXINGTON AVE, 7TH FLOOR  
NEW YORK, NY 10170

Mailing Address  
420 LEXINGTON AVE, 7TH FLOOR  
NEW YORK, NY 10170

**DO NOT WRITE IN THIS SPACE**

04142006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
41-2151290

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**

**9. MANAGING MEMBERS/MANAGERS**

TITLE	MGRM
NAME	NP/I&G INSTITUTIONAL RETAIL COMPANY, LLC
STREET ADDRESS	420 LEXINGTON AVENUE, 7TH FLOOR
CITY-ST-ZIP	NEW YORK, NY 10170

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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100074150771  
05/08/06--01016--024 \*\*100.00

**DO NOT WRITE  
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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:** \_\_\_\_\_

Steven F. Siegel

4/14/2006 212-869-3000