

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000000324

FILED  
Feb 24, 2006  
Secretary of State

Entity Name: EXCHANGE PROPERTIES, LLC

**Current Principal Place of Business:**

55 OGDEN AVE  
CLARENDON HILLS, IL 60514

**New Principal Place of Business:**

**Current Mailing Address:**

55 OGDEN AVE  
CLARENDON HILLS, IL 60514

**New Mailing Address:**

FEI Number: 36-4449405

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CORPDIRECT AGENTS, INC.  
515 E. PARK AVE.  
TALLAHASSEE, FL 32301 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: HICKEY, BRIAN  
Address: 427 N. MADISON  
City-St-Zip: HINSDALE, IL 60521

Title: MGR ( ) Delete  
Name: VOROBIEV, ANDREI  
Address: 639 S. JACKSON  
City-St-Zip: HINSDALE, IL 60521

**ADDITIONS/CHANGES:**

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: BRIAN HICKEY

PRES

02/24/2006

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