FILED Feb 12, 2007 08:00 AM Secretary of State

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000002231

1. Entity Name

CAPRI DEVELOPMENT FLA 11102, LLC



Principal Place of Business

208 S. LA SALLE STREET, STE. 1144 CHICAGO, IL 60604 Mailing Address

208 S. LA SALLE STREET, STE. 1144 CHICAGO, IL 50604



DO NOT WRITE IN THIS SPACE

01302007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2565855 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RADKE, RICHARD W 601 BAYSHORE BOULEVARD, SUITE 700 TAMPA, FL 33606

DO NOT WRITE IN THIS SPACE

8. The above the obligat	named entity submits this atalement for the purpose of chartions of registered agent.	nging its registered office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept	
SIGNATURE.				
	Signature, types or present mente of registered agent and title if approaching	(NOTE Registered Agent signature registed when reinstating)	DATE	
F	iling Fee is \$50.00 lue by May 1, 2007			
9.	MANAGING MEMBERS/MANAGERS			
TITLE NAME STREET ADDRESS CITY-ST-ZIF	MGR GREENBERG, DAVID 208 S. LA SALLE STREET, STE. 1144 CHICAGO, IL 80604		U0000 0 633410	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			02/21/07-80080-017 50.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE	
TITLE NAME STHEET ADDRESS CITY-ST-ZIP		IN '	IN THIS SPACE	
TITLE NAME STREET ADDRESS GITY-ST-ZIP				
TITLE NAME				

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florids 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 path; 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, Florids Statutes.

David

SIGNATURE:

CITY-SY-ZIP

JRE: Hour Juliubuy 6 Render G
BIGHATURE AND TYPED OR PRINTED NAME OF SCHING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

2-5-07

312-671-2000

Daytime Pitong #