2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000002960

1. Entity Name FFR LEXINGTON, LLC



Principal Place of Business

SIGNATURE:

SIGNATURE AND TYPE

C/O FOREST PROPERTIES MANAGEMENT 19 NEEDHAM STREET NEWTON HIGHLANDS, MA 02461 Mailing Address

C/O FOREST PROPERTIES MANAGEMENT 19 NEEDHAM STREET NEWTON HIGHLANDS, MA 02461

FILED Apr 28, 2008 08:00 AN Secretary of State



02212008 No Chg-LLC

CR2E083 (12/07)

Layting Protect

4. FEI Number	Applied For	
20-2727639	Not Apolicable	
5. Certificate of Status Desired	\$5.00 Additional Fee Required	

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525

DO NOT WRITE IN THIS SPACE

the obligations of registered agent.			
SIGNATURE	Signature, typed or printed name of registered agent and title it applicable	(NOTE Registered Agont signature required when reinstating)	DATE
	NOW!!! FEE IS \$138.75 7 1, 2008 Fee will be \$538.75		U00000929538
9.	MANAGING MEMBERS/MANAGERS		05/21/08-80072-015 138.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FOREST FLORIDA REALTY, LLC 19 NEEDHAM STREET NEWTON HIGHLANDS, MA 02461		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-2IP		IN -	THIS SPACE
TITLE NAME STREET ADDRESS CITY+ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-2IP	1		
11. I hereby indicated limited lia	certify that the information supplied with his filing does not on this report is true and accurate and that hy signature solutily company or the receiver of turstee empowered to exe	qualify for the exemptions contained in Chapter 11 half have the same legal effect as if made under o cute this report as required by Chapter 608. Florid	 Florida Statutes. I further certify that the information ath; that I am a managing member or manager of the a Statutes.

RINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE