


**2006 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Jan 31, 2006 08:00 AM**  
**Secretary of State**

DOCUMENT # M05000003247  
 1. Entity Name  
 KUCK, CASABLANCA & HOWARD, LLC



Principal Place of Business 3350 PEACHTREE ROAD, N.E., SUITE 1600 ATLANTA, GA 30326	Mailing Address 3350 PEACHTREE ROAD, N.E., SUITE 1600 ATLANTA, GA 30326
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01122008No Chg-LLC CR2E083 (11/05)

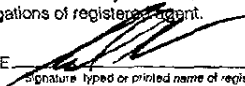
**DO NOT WRITE IN THIS SPACE**

4. FEI Number 02-0670442	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent  
 CASABLANCA, MARISA ESQ  
 RIVERGATE PLAZA, SUITE 1020  
 444 BRICKELL AVENUE  
 MIAMI, FL 33131

**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  DATE 1/26/05  
(Signature typed or printed name of registered agent and file if applicable) (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00**  
**Due by May 1, 2006**

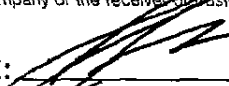
000000410156  
 02/09/06 80025-004 50.00

**D. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM KUCK, CHARLES H 3350 PEACHTREE ROAD, N.E., SUITE 1600 ATLANTA, GA 30326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM CASABLANCA, MARISA 444 BRICKELL AVENUE, SUITE 1020 MIAMI, FL 33131
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM HOWARD, CHARLES H 3350 PEACHTREE ROAD, N.E., SUITE 1600 ATLANTA, GA 30326
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 19, 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:  DATE 1/26/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #