

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Mar 24, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90197 043 \*\*\*\*50.00

DOCUMENT # M05000003482

1. Entity Name  
GRW LINCOLN LLC



Principal Place of Business  
C/O GREENFIELD PARTNERS LLC  
50 NORTH WATER STREET  
SOUTH NORWALK, CT 00054

Mailing Address  
C/O GREENFIELD PARTNERS LLC  
50 NORTH WATER STREET  
SOUTH NORWALK, CT 00054

30003273

2. Principal Place of Business

3. Mailing Address GRW LINCOLN, LLC  
c/o RAND REAL ESTATE Services

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02242006 Chg-LLC CR2E083 (11/05)

City & State

City & State  
Westport, CT

4. FEI Number  
20-3035863

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BLUM, SAMUEL S ESQ.  
2866 TIGERTAIL AVE., SITE 106  
COCONUT GROVE, FL 33133

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 re-registering)

DATE

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

Make check payable to  
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGR, BARRY MARCUS  
GREENFIELD LINCOLN, LLC  
50 NORTH WATER STREET  
SOUTH NORWALK, CT 00054 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MANAGING ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MEMBER - JAMES H. RANDEL  
CT LINCOLN ROAD ASSOCIATES, LLC  
205 POST ROAD WEST  
WESTPORT, CT 06880 ☐ Change ☒ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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.

CT Lincoln Road Associates, LLC

SIGNATURE: By:

By:

3-2-06

203-226-8727

SIGNATURE AND TYPED OR PRINTED NAME OF FILING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

James A. Randel, Manager



ATTACHMENT  
30003273

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 8, 2006

GRW LINCOLN LLC  
C/O RAND REAL ESTATE SERVICES  
265 POST ROAD WEST  
WESTPORT, CT 06880

Subject: GRW LINCOLN LLC

Reference Number: M05000003482

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$50.00; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Provide the title(s) of each manager, managing member or principal listed on the report or on an attachment.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 6478, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 245-6051.

/CJ

ANNUAL REPORTS SECTION

*The information you requested has been added.*