

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M06000000848

Entity Name: CMBKJV PARTNER LLC

FILED  
Apr 03, 2007  
Secretary of State

**Current Principal Place of Business:**

522 FIFTH AVENUE  
NEW YORK, NY 10036

**New Principal Place of Business:**

245 PARK AVENUE  
2ND FLOOR  
NEW YORK, NY 10167

**Current Mailing Address:**

522 FIFTH AVENUE  
NEW YORK, NY 10036

**New Mailing Address:**

P.O. BOX 5005  
NEW YORK, NY 10163

FEI Number: 20-4284108

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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: COMMINGLED PENSION T, RUST FUND (SPE C IAL SIT  
Address: 522 FIFTH AVENUE  
City-St-Zip: NEW YORK, NY 10036

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: COMMINGLED PENSION T, RUST FUND (SPE C IAL SIT  
Address: 245 PARK AVENUE, 2ND FLOOR  
City-St-Zip: NEW YORK, NY 10167

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: CYNDI P. QUINTERO

VAS

04/03/2007

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