

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M06000005508 1. Entity Name GRANITE POLO CLUB SHOPPES LLC					
Principal Place of Business 300 CAMPUS DRIVE, 3RD FLOOR FLORHAM PARK, NJ 07932			Mailing Address 300 CAMPUS DRIVE, 3RD FLOOR FLORHAM PARK, NJ 07932		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State Zip		City & State Zip		Country	
4. FEI Number 04272007 Chg-LLC CR2E083 (12/06)				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required				6. Name and Address of Current Registered Agent CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525	
7. Name and Address of New Registered Agent 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 _____ (NOTE: Reg. stated Agent signature req. if not reappointing) DATE _____					
Filing Fee is \$50.00 Due by May 1, 2007		BK		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MTRM BLACKROCK GRANITE PROPERTY FUND, L.P. 300 CAMPUS DRIVE, 3RD FLOOR FLORHAM PARK, NJ 07932 <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition <div style="text-align: center; font-size: 1.2em;">400100583664</div>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
SIGNATURE: <u>William A. Finelli</u> <i>William A. Finelli CEO & Treasurer</i> 4/30/07 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Duplicating Page #</small>					

FILED

07 MAY -1 AM 9:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BK





CORPORATION SERVICE COMPANY

M06000005508

ACCOUNT NO. : 072100000032

REFERENCE : 876536 7560107

AUTHORIZATION :

COST LIMIT : \$ 50.00

FILED
07 MAY - 1 AM 9:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : May 1, 2007

ORDER TIME : 1:07 PM

ORDER NO. : 876536-020

CUSTOMER NO: 7560107

BK

ANNUAL REPORT FILING

RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
2007 MAY - 1 PM 3:12
TALLAHASSEE, FLORIDA
I DO ACKNOWLEDGE
SUFFICIENCY OF FILING

NAME: GRANITE POLO CLUB SHOPPES LLC

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

BK

CONTACT PERSON: Sara Lea - Ext. 2914

EXAMINER'S INITIALS: _____