

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2006 MAY -1 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M98000000125

1. Entity Name
W9/RSO GEN-PAR, L.L.C.



Principal Place of Business

% INV TAX GROUP
10 HANOVER SQ 22ND FL
NEW YORK, NY 10005

Mailing Address

% INV TAX GROUP
10 HANOVER SQ 22ND FL
NEW YORK, NY 10005

BSK



04262006No Chg-LLC

CR2E083 (11/05)

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4. FEI Number
75-2746931

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324

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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 reinstating)

DATE

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

700074673537
05/16/06--01040--005 **350.00

9. MANAGING MEMBERS/MANAGERS

TITLE MGR
NAME ROTHENBERG, STUART
STREET ADDRESS 85 BROAD STREET
CITY-ST-ZIP NEW YORK, NY 10004

TITLE MGR
NAME LANGER, JONATHAN
STREET ADDRESS 85 BROAD STREET
CITY-ST-ZIP NEW YORK, NY 10004

TITLE VP
NAME WILLIAMS, TODD A
STREET ADDRESS 85 BROAD STREET
CITY-ST-ZIP NEW YORK, NY 10004

TITLE AT
NAME WEISS, MITCHELL
STREET ADDRESS 85 BROAD STREET
CITY-ST-ZIP NEW YORK, NY 10004

TITLE VP
NAME KAVA, ALAN S
STREET ADDRESS 10 HANOVER SQ
CITY-ST-ZIP NEW YORK, NY 10005

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE

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:

W9/RSO GEN-PAR, L.L.C.

Michael S. Weiss

4/28/06

312-902-3867

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

Date

Daytime Phone #