


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 AM
Secretary of State

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| DOCUMENT # P98000042247 | |  |
| 1. Entity Name G-P NH6 LR V, INC. | | |
| Principal Place of Business 2295 CORPORATE BOULEVARD, N.W. SUITE 222 BOCA RATON, FL 33431 | Mailing Address 2295 CORPORATE BOULEVARD, N.W. SUITE 222 BOCA RATON, FL 33431 | |
| DO NOT WRITE IN THIS SPACE | | |
| 6. Name and Address of Current Registered Agent HERRICK, NORTON C/O THE HERRICK COMPANY, INC. 2295 CORP. BLVD., N.W., SUITE 222 BOCA RATON, FL 33431 | | 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 _____ <small>Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | |
| FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 | | 9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees |
| 10. OFFICERS AND DIRECTORS | | 1100000476381 04/06/06-80008-002 2063.75 |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VPS HERRICK, NORTON 2295 CORP. BLVD., N.W., SUITE 222 BOCA RATON, FL 33431 | DO NOT WRITE IN THIS SPACE |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPAS HERRICK, HOWARD 2 RIDGEDALE AVE STE 370 CEDAR KNOLLS, NJ 07927 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DVAS HERRICK, MICHAEL 2 RIDGEDALE AVE STE 370 CEDAR KNOLLS, NJ 07927 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | C KERMALLI, NISAR 2 RIDGEDALE AVE STE 370 CEDAR KNOLLS, NJ 07927 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D HERRICK, EVAN 2 RIDGEDALE AVE #370 CEDAR KNOLLS, NJ 07927 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | |
| 12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. | | |
| SIGNATURE: <u>N. Kermalli - Controller</u> 2/27/06 | | |