## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # P98000042266

1. Entity Name

G-P NH6 LR VI, INC.



FILED Mar 22, 2006 08:00 A! Secretary of State

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

A commence of the control of the con



01182006

No Chg-P

CR2E034 (11/05)

4. FEI Number

65-0833713

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

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

|  |   | · · _ · · · ·                                       | <u> </u>                                       | سلمر کاششور کی دید دادور در دادور دادور در دادور دادور در | ر الاشعرة مواقعة والمؤرث والأراب   |
|--|---|---|--|--|--|
|  | named entity submits this statement for the pations of registered agent.            | ourpose of changing its register                    | red office or registered agent, or bo          | ith, in the State of Florida. I am famil   | iar with, and accept   |
| SIGNATURE.                                     | Signature, typed or printed name of registered agent and title                      | if applicable. (NOTE: Registers                     | ad Agent signature required when reinstalling) | DATE   |  |
|  | E NOW!!! FEE IS \$150.00<br>ay 1, 2006 Fee will be \$550.00                         | Election Campaign Fina     Trust Fund Contribution. |  | 1100000476382<br>04/06/06-80008-00   | 2 2063.75  |
| 10.  | OFFICERS AND DIREC  | CTORS   | and the second second from                     | na crimana, 1 1922, passarina and 1937,  | the second of th |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | VPS<br>HERRICK, NORTON<br>2295 CORP. BLVD., N.W., SUITE 222<br>BOCA RATON, FL 33431 |   |  |  |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | DPAS HERRICK, HOWARD 2 RIDGEDALE AVE STE 370 CEDAR KNOLLS, NJ 07927                 |   |  |  | g a feet and a feet and a feet and a feet and a feet a feet a feet and a feet a |
| TITLE NAME STREET ADDRESS GITY-ST-ZIP          | DVAS<br>HERRICK, MICHAEL<br>2 RIDGEDALE AVE STE 370<br>CEDAR KNOLLS, NJ 07927       |   | DO   | NOT WRITE  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | C<br>KERMALLI, NISAR<br>2 RIDGEDALE AVE STE 370<br>CEDAR KNOLLS, NJ 07927           |   | IN '   | THIS SPACE   |  |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP          | D<br>HERRICK, EVAN<br>2 RIDGEDALE AVE#370<br>CEDAR KNOLLS, NJ 07927                 |   |  | · · · · · · · · · · · · · · · · · · ·  |  |

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 it made under oath; that I am an officer or director of the corporation or the repeiver 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 attactment with an address, with all other life empowered.

SIGNATURE:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

GNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/26

Daydma Phone ≠