


**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**Apr 17, 2008 08:00 A**  
**Secretary of State**

DOCUMENT # L0100000601 1. Entity Name STRATEGIC CROSSING PHASE II, L.L.C.	
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Principal Place of Business 17 WEST CEDAR STREET SUITE 3 PENSACOLA, FL 32501	Mailing Address P.O. BOX 12725 PENSACOLA, FL 32501
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**DO NOT WRITE IN THIS SPACE**

04142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 59-3695067	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

**6. Name and Address of Current Registered Agent**

BOOKMAN, ALAN B  
 30 SOUTH SPRING STREET  
 PENSACOLA, FL 32501

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

U00000902322  
 04/30/08-80002-002 138.75

**9. MANAGING MEMBERS/MANAGERS**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NASH, NEAL B 120 E. MAIN STREET SUITE A PENSACOLA, FL 32502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CARR, JOHN S 17 WEST CEDAR STREET SUITE 3 PENSACOLA, FL 32502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR NICKELSEN, ERIC J 17 WEST CEDAR STREET SUITE 3 PENSACOLA, FL 32502
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE 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.