## 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000006371

Entity Name: DEVELOPERS CONSULTANT SERVICE II, L.L.C.

FILED Jan 04, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

8969 CHARLESTON PARK ORLANDO, FL 32819

Current Mailing Address: New Mailing Address:

8969 CHARLESTON PARK ORLANDO, FL 32819

City-St-Zip:

ORLANDO, FL 32812

FEI Number: 54-2089967 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BATURA, PHILIP L
8969 CHARLESTON PK
WINTER PARK, FL 32789 US
BATURA, PHILIP L
8969 CHARLESTON PK
ORLNDO, FL 32819 US

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.

SIGNATURE: PHILIP BATURA 01/04/2005

Electronic Signature of Registered Agent Date

City-St-Zip:

ORLANDO, FL 32819

MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:

 Title:
 MGRM () Delete
 Title:
 MGRM (X) Change () Addition

 Name:
 BATURA, PHILIP L
 Name:
 BATURA, PHILIP L

 Address:
 5460 HOFFNER AVE. STE. 408
 Address:
 8969 CHARLSTON PK

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32819

Title: MGRM ( ) Delete Title: MGRM ( X) Change ( ) Addition
Name: BATURA, FRANKIE D
Address: 5460 HOFFNER AVE.. STE. 408
Address: 8969 CHARLSTON PK

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: PHILIP BATURA MGR 01/04/2005