

**2009 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Apr 06, 2009  
Secretary of State**

DOCUMENT# L04000037960

Entity Name: CARR RESIDENTIAL II, LLC

**Current Principal Place of Business:**

1100 LEE WAGENER BLVD, 327  
FT. LAUDERDALE, FL 33315

**New Principal Place of Business:**

**Current Mailing Address:**

1100 LEE WAGENER BLVD, 327  
FT. LAUDERDALE, FL 33315

**New Mailing Address:**

FEI Number: 20-1162859      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

GRAGG, K. LAWRENCE  
200 S. BISCAYNE BLVD., STE. 4900  
MIAMI, FL 33131 US

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

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: CARR, JAMES  
Address: 1560 S. DIXIE HWY, SUITE 211  
City-St-Zip: CORAL GABLES, FL 33146

Title: MGRM ( ) Delete  
Name: CARR, SUSAN  
Address: 1560 S. DIXIE HWY. SUITE 211  
City-St-Zip: CORAL GABLES, FL 33146

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES CARR

MGRM

04/06/2009

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date