2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2012
Secretary of State

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Entity Name: 8770 MIDNIGHT PASS II, LLC

Current Principal Place of Business:

8764 MIDNIGHT PASS
A-401
SARASOTA, FL 34242 US

New Principal Place of Business:

Current Mailing Address:

3681 FOLLY QUARTER RD
ELLICOTT CITY, MD 21042 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HYMAN, LAWRENCE R
8764 MIDNIGHT PASS
A-401
SARASOTA, FL 34242 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: DR
Name: HYMAN, LAWRENCE R
Address: 3681 FOLLY QUARTER RD
City-St-Zip: ELLICOTT CITY, MD 21042

Title: MRS
Name: HYMAN, LOIS W
Address: 3681 FOLLY QUARTER RD
City-St-Zip: ELLICOTT CITY, MD 21042

I hereby 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 Statues.

SIGNATURE: LAWRENCE R HYMAN M 04/10/2012

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