

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000070888

FILED  
Apr 14, 2008  
Secretary of State

Entity Name: THE VILLAGE ON WHITEHEAD II, LLC

**Current Principal Place of Business:**

1010 KENNEDY DR.  
201  
KEY WEST, FL 33040

**New Principal Place of Business:**

**Current Mailing Address:**

1010 KENNEDY DR.  
201  
KEY WEST, FL 33040

**New Mailing Address:**

FEI Number: 26-1317787      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

ANDERSEN, WILLIAM  
1010 KENNEDY DR.  
201  
KEY WEST, FL 33040 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: MGR      ( ) Delete  
Name: ANDERSEN, JANE L  
Address: 1010 KENNEDY DR. #201  
City-St-Zip: KEY WEST, FL 33040

Title: MGR      ( ) Delete  
Name: ANDERSEN, WILLIAM  
Address: 1010 KENNEDY DR. #201  
City-St-Zip: KEY WEST, FL 33040

Title: MGR      ( ) Delete  
Name: LOOMIS, EDWARD P JR.  
Address: 105 KENTUCKY DOWNS WAY  
City-St-Zip: MACON, GA 31210

**ADDITIONS/CHANGES:**

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

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: WILLIAM E ANDERSEN

RA

04/14/2008

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