

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000122643

**FILED**  
**Mar 02, 2009**  
**Secretary of State**

**Entity Name:** CPES II, LLC

**Current Principal Place of Business:**

8108 OLD HIXON ROAD  
TAMPA, FL 33626

**New Principal Place of Business:**

**Current Mailing Address:**

8108 OLD HIXON ROAD  
TAMPA, FL 33626

**New Mailing Address:**

**FEI Number:** 14-2013672

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BLANTON, MARK E  
8108 OLD HIXON ROAD  
TAMPA, FL 33626 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: ALLIANCE EXCHANGE CORP.  
Address: 8108 OLD HIXON ROAD  
City-St-Zip: TAMPA, FL 33626

**ADDITIONS/CHANGES:**

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: MARK E. BLANTON

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03/02/2009

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