2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L99000007422

1. Entity Name

HOBÉ SOUND MANAGEMENT II, L.L.C.



FILED Jul 19, 2006 08:00 AM Secretary of State

Principal Place of Business

494 S. BEACH ROAD HOBE SOUND, FL 33455 Mailing Address

494 S. BEACH ROAD HOBE SOUND, FL 33455



07042006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 65-0966518 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

HANLON, M. TIMOTHY 321 ROYAL POINCIANA PLAZA PALM BEACH. FL 33480

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			is the Coast Florida Landing the
	named entity submits this statement for the purpose of cha ions of registered agent.	inging its registered office or registered agent, or both	n, in the state of Piorida. Tam familiar with, and accept
SIGNATURE_	Signature, typed or printed name of registered agent and trite if applicable	(NOTE Registered Agent signature required when reinstating)	DATE
Fil Due t	ling Fee is \$50.00 by September 6, 2006 MANAGING MEMBERS/MANAGERS		•
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR MAGILIO, VINCENT 494 SOUTH BEACH ROAD HOBE SOUND, FL 33455		Hoooodff 1000
TITLE NAME STREET ADDRESS			U00000571262 07/19/06-80011-001 50.00

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11. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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:

CITY-ST-ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

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TOKE

7.12:00

72.641.1110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

ete

Daytime Phone #