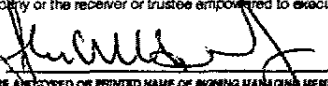


FILED
Jan 27, 2005 08:00 AM
Secretary of State

**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

DOCUMENT # L02000019432		
1. Entity Name HILLSBORO EXECUTIVE PARK II LLC		
Principal Place of Business C/O ELIZABETH HOOVER 2700 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	Mailing Address C/O ELIZABETH HOOVER 2700 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	
DO NOT WRITE IN THIS SPACE		
01142005No Chg-LLC CR2E083 (10/03)		
4. FEI Number 55-0789214		Applied For Not Applicable
5. Certificate of Status Desired ☐		\$5.00 Additional Fee Required
6. Name and Address of Current Registered Agent		
THOMAS, BRADFORD A, ESQ. 6161 BLUE LAGOON DR. SUITE 350 MIAMI, FL 33126		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating))		
DATE _____		
Filing Fee is \$50.00 Due by May 1, 2005		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR HOOVER, JOHN W JR. 2423 ALHAMBRA CIRCLE CORAL GABLES, FL 33134	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RAPPAPORT, MELBOURNE 5546 CROYDON COURT BOCA RATON, FL 33486	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR NORTHCUTT, TOM 3241 NE 56TH COURT FORT LAUDERDALE, FL 33308	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  John W. Hoover, Jr. 305-642-6220		
MGR 1/25/05 ext 151		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #

000000201002
01/28/05-80052-019 50.00