

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000036834

Entity Name: NBC II, LLC

FILED  
Jan 17, 2008  
Secretary of State

## Current Principal Place of Business:

909 10TH STREET SOUTH  
SUITE 302  
NAPLES, FL 34102 US

## New Principal Place of Business:

## Current Mailing Address:

909 10TH STREET SOUTH  
SUITE 302  
NAPLES, FL 34102 US

## New Mailing Address:

PO BOX 140668  
CORAL GABLES, FL 33114-066 US

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MEINERS, LOUIS M JR.  
3073 HORSESHOE DRIVE SOUTH  
SUITE 210  
NAPLES, FL 34104 US

## Name and Address of New Registered Agent:

MJF REGISTERED AGENT  
153 SEVILLA AVENUE  
CORAL GABLES, FL 33134 US

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: MICHAEL J FREEMAN

01/17/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: PETERMAN, JOHN  
Address: 909 10TH STREET SOUTH, SUITE 302  
City-St-Zip: NAPLES, FL 34102 US

Title: MGRM ( ) Delete  
Name: PETERMAN, CATHERINE  
Address: 909 10TH STREET SOUTH, SUITE 302  
City-St-Zip: NAPLES, FL 34102 US

## ADDITIONS/CHANGES:

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: JOHN PETERMAN

MGRM

01/17/2008

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