

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000000601

FILED
Apr 20, 2009
Secretary of State

Entity Name: STRATEGIC CROSSING PHASE II, L.L.C.

Current Principal Place of Business:

17 WEST CEDAR STREET
SUITE 3
PENSACOLA, FL 32501

New Principal Place of Business:

21 S TARRAGONA STREET
SUITE 102
PENSACOLA, FL 32502

Current Mailing Address:

P.O. BOX 12725
PENSACOLA, FL 32501

New Mailing Address:

21 S TARRAGONA STREET
SUITE 102
PENSACOLA, FL 32502

FEI Number: 59-3695067

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BOOKMAN, ALAN B
30 SOUTH SPRING STREET
PENSACOLA, FL 32501 US

Name and Address of New Registered Agent:

DANIEL, NIXON J
501 COMMENDENCIA STREET
PENSACOLA, FL 32502 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: J. NIXON DANIEL

04/20/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: NASH, NEAL B
Address: 120 E. MAIN STREET SUITE A
City-St-Zip: PENSACOLA, FL 32502

Title: MGR () Delete
Name: CARR, JOHN S
Address: 17 WEST CEDAR STREET SUITE 3
City-St-Zip: PENSACOLA, FL 32502

Title: MGR () Delete
Name: NICKELSEN, ERIC J
Address: 17 WEST CEDAR STREET SUITE 3
City-St-Zip: PENSACOLA, FL 32502

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: PRES (X) Change () Addition
Name: DANIEL, NIXON J
Address: 21 S TARRAGONA STREET, SUITE 102
City-St-Zip: PENSACOLA, FL 32502

Title: VP (X) Change () Addition
Name: LOVELL, WILLIAM A
Address: 21 S TARRAGONA STREET, SUITE 102
City-St-Zip: PENSACOLA, FL 32502

Title: DIR (X) Change () Addition
Name: KILLAM, MICHAEL L
Address: 21 S TARRAGONA STREET, SUITE 102
City-St-Zip: PENSACOLA, FL 32502

Title: SEC () Change (X) Addition
Name: CARSON, JOSEPH E
Address: 21 S TARRAGONA STREET, SUITE 102
City-St-Zip: PENSACOLA, FL 32502

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: WILLAM A. LOVELL

VP

04/20/2009

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