


# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

Jun 06, 2005 08:00 AM  
Secretary of State

DOCUMENT # L00000002339	
1. Entity Name DOWN SOUTH APARTMENTS II, L.C.	

Principal Place of Business 28252 SW 158TH COURT HOMESTEAD, FL 33033	Mailing Address 28252 SW 158TH COURT HOMESTEAD, FL 33033
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08022005No Chg-LLC

CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 65-0992965	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent  LOVE, GWENDOLYN 28252 SW 158TH COURT HOMESTEAD, FL 33033
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

Filing Fee is \$50.00  
Due by September 7, 2005

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOVE, GWENDOLYN 28252 SW 158TH COURT HOMESTEAD, FL 33033
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LOVE, LEESEL JR. 28252 SW 158TH COURT HOMESTEAD, FL 33033
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 605, Florida Statutes.

SIGNATURE: Gwendolyn Love 6-2-05 (305) 248-3745  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #