2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 15, 2005
Secretary of State

DOCUMENT# L00000002399

Entity Name: MINK ASSOCIATES II, LLC

Current Principal Place of Business:

533 CRYSTAL LAKE DRIVE
AVON PARK, FL 33325

New Principal Place of Business:

84 SOUTH MAIN STREET
FAIRPORT, NY 14450

Current Mailing Address:

533 CRYSTAL LAKE DRIVE
AVON PARK, FL 33325

New Mailing Address:

84 SOUTH MAIN STREET
FAIRPORT, NY 14450

FEI Number: 16-1582223 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

JONATHAN JAMES DAMONTE, CHARTERED
12110 SEMINOLE BLVD.
LARGO, FL 33778 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete
Name: ROSS, GERALD D
Address: 84 SOUTH MAIN STREET
City-St-Zip: FAIRPORT, NY 14450

Title: MGRM ( ) Delete
Name: MINK, ARLENE H
Address: 5 BRAGDON DRIVE
City-St-Zip: ROCHESTER, NY 14618

ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: MGRM (X) Change ( ) Addition
Name: MINK, ARLENE H
Address: 8875 COSTA VERDE BLVD # 801
City-St-Zip: SAN DIEGO, CA 92122

I hereby certify that the information supplied with this filing does not qualify for the 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 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: GERALD D ROSS MGR 07/15/2005

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