

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000005122

FILED  
Apr 30, 2009  
Secretary of State

Entity Name: TRADEWINDS HAMMOCKS II, L.L.C.

**Current Principal Place of Business:**

25000 OVERSEAS HWY  
SUMMERLAND KEY, FL 330421075

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 42-1075  
SUMMERLAND KEY, FL 330421075

**New Mailing Address:**

FEI Number: 59-3698606

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

ROSASCO, PETER L JR  
25000 OVERSEAS HWY  
SUMMERLAND KEY, FL 330421075 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: MGRM ( ) Delete  
Name: HARDING CONSTRUCTION SERVICES, INC.  
Address: 5505 N. ATLANTIC AVE., #115  
City-St-Zip: COCOA BEACH, FL 32931

Title: MGRM ( ) Delete  
Name: MRT OF THE FLORIDA KEYS, LLC  
Address: PO BOX 4201075  
City-St-Zip: SUMMERLAND KEY, FL 33042

**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: PETER ROSASCO

MGRM

04/30/2009

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