


2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 25, 2005 08:00 AM
Secretary of State

DOCUMENT # L00000015957
 1. Entity Name
 PURSUITS II, L.L.C.



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|--|--|
| Principal Place of Business 2579 HUNT CLIFF LANE PANAMA CITY, FL 32405 | Mailing Address 2579 HUNT CLIFF LANE PANAMA CITY, FL 32405 |
|--|--|

DO NOT WRITE IN THIS SPACE



04192005 No Chg-LLC CR2E083 (10/03)

| | |
|--|--------------------------------|
| 4. FEI Number 59-3719890 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input checked="" type="checkbox"/> | \$5.00 Additional Fee Required |

6. Name and Address of Current Registered Agent

HARE, DIANE C
 2589 JENKS AVE
 PANAMA CITY, FL 32405

DO NOT WRITE IN THIS SPACE

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 May 1, 2005**

U00000330453
 04/25/05-00181-008 55.00

9. MANAGING MEMBERS/MANAGERS

| | |
|--|--|
| TITLE NAME STREET ADDRESS CITY - ST - ZIP | MGRM BONE, WILLIAM D 2579 HUNT CLIFF LANE PANAMA CITY, FL 32405 |
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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 608, Florida Statutes.

SIGNATURE: W D Bone Date: 22 Apr 05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Daytime Phone #