


**2005 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # L01000015566 1. Entity Name KINGS ANDOVER PHASE II, LLC	
---	---

Principal Place of Business 201 ALHAMBRA CIRCLE SUITE 601 CORAL GABLES, FL 33134	Mailing Address 201 ALHAMBRA CIRCLE SUITE 601 CORAL GABLES, FL 33134
---	---

DO NOT WRITE IN THIS SPACE



04282005No Chg-LLC

CR2E083 (10/03)

4. FEI Number NOT APPLICABLE	Applied For Not Applicable
---------------------------------	-------------------------------

5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
---	--

6. Name and Address of Current Registered Agent

FIELDSTONE, RONALD R
201 ALHAMBRA CIRCLE
SUITE 601
CORAL GABLES, FL 33134

**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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LUBECK, DANIEL 201 ALHAMBRA CIR., STE 601 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR LUBECK, JOSEPH G 201 ALHAMBRA CIR., STE 601 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR FIELDSTONE, RONALD R 201 ALHAMBRA CIR., STE 601 CORAL GABLES, FL 33134
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

000000356017
05/04/05-80018-015 50.00

**DO NOT WRITE
IN THIS SPACE**

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:  Donald R. Fieldstone 4/28/05 305-357-1001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #