

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000018354

Entity Name: JOHN HENRY II, L.L.C.

FILED  
Feb 07, 2005  
Secretary of State

## Current Principal Place of Business:

354 LAKEVIEW STREET  
ORLANDO, FL 32804

## New Principal Place of Business:

3825 CANOE CREEK ROAD  
ST CLOUD, FL 34772

## Current Mailing Address:

P.O. BOX 540118  
ORLANDO, FL 32854

## New Mailing Address:

3825 CANOE CREEK ROAD  
ST CLOUD, FL 34772

FEI Number: 59-3752037

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JONES, JOHN J  
354 LAKEVIEW STREET  
ORLANDO, FL 32804 US

## Name and Address of New Registered Agent:

JONES, JOHN J  
3825 CANOE CREEK ROAD  
ST CLOUD, FL 34772 US

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: JOHN J JONES

02/07/2005

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MEMBERS:

Title: MGR ( ) Delete  
Name: JONES, JOHN J  
Address: P.O. BOX 540118  
City-St-Zip: ORLANDO, FL 32854

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGR (X) Change ( ) Addition  
Name: JONES, JOHN J  
Address: 3825 CANOE CREEK ROAD  
City-St-Zip: ST CLOUD, FL 34772

Title: MGRM ( ) Change (X) Addition  
Name: YATES, HENRY C  
Address: 3825 CANOE CREEK ROAD  
City-St-Zip: ST CLOUD, FL 34772

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: HENRY C YATES

MGRM

02/07/2005

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