


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 22, 2006 08:00 A
Secretary of State

DOCUMENT # L02000025239 1. Entity Name SUSSEX HOLDINGS II LLC	
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Principal Place of Business 94 SOUTHVIEW ROAD SOUTHWICK, WEST SUSSEX ENGLAND BN42 4TT,	Mailing Address 115 S ALBANY AVE TAMPA, FL 33606
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DO NOT WRITE IN THIS SPACE



03122006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 98-0383371	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**JACOB REAL ESTATE SERVICES, INC.
115 S ALBANY AVENUE
TAMPA, FL 33606**

**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 file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

000000477621
04/06/06-80058-015 50.00

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM SD HOLDINGS LIMITED 94 SOUTHVIEW ROAD SOUTHWICK,W. SUSSEX, ENGLAND,
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *John C. [Signature]* *Max [Signature]* 3/17/06 813-258-3200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #