## **2008 LIMITED LIABILITY COMPANY** ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

## DOCUMENT # L03000005346

1. Entity Name

SIGNATURE:

ST. JOHNS SPE GP II LLC



**FILED** May 13, 2008 8:00 am Secretary of State

05-13-2008 90064 013 \*\*\*138.75

4-23-08

Davista Porce #

Principal Place of Business			Mailing Address								
ONE SE 3RD AVE., STE 3100 MIAMI FL 33131			ONE SE 3RD AVE., STE 3100 MIAMI FL 33131								
2. Principal Place of Business - No P.O. Box # 800 Brickell Avenue		3. Mailing Address 800 Brickell Avenue			┦ "	<b>23</b> (1811 <b>811 88188</b> 11111 <b>88</b> 111 <b>8</b>		I EUSE WIN BIBID I			
Suite, Apt. #. etc. Penthouse 1		Suite, Apt. #, etc. Penthouse 1		1	st MOORE	CR2E083	(10/07)				
City & State Miami			City & State Miami			4. FEI Num	45-05032	72	<del></del>	pplied For lot Applicable	
Zip Fl	L.	Country 33131	Zip FL	Cour	33131	5. Certifica	te of Status Desired	, 0	\$5.00 Ad Fee Require		
	6. Name	and Address of Current	Registered Agent			7. Name a	nd Address of Nev	Registered	Agent		
TRACY, GRANVIL M					Name Street Address	(P.O. Box Nuc	oher is Not Accepta	hlal			
ONE SE 3RD AVE., STE 3100 MIAMI FL 33131				The part of the state of the st		Street Address (P.O. Box Number is Not Acceptable) 800 Brickell Avenue					
						Penthouse 1					
					City	Mia		FL	Zip Cog		
	named entity ions of regist		r the purpose of changing it	s register	ed office or regist	tered agent, or i	ooth, in the State of	Florida. I am	familiar with	, and accept	
SIGNATURE .	Cianton band	or printed name of registered agent	northly (orginant)	TE Decision	*			DATE			
	ыднание, куреп	of printed harne or registered agent	вло внем аррясиона. (190	Herjishara	o Agent signature requi	rea when reinstaling)	1	DATE			
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE