DO NOT WRITE IN THIS SPACE

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT **DOCUMENT # L03000043853** 1. Entity Name DEERWOOD II, LLC



Principal Place of Business

1720 SE 18th Ave. #200

Mailino Address

1700 SE 17TH STREET, SUITE 300

-1700 SE-17TH STREET, SUITE-300

OCALA, FL 34471

OCALA, FL 34471

1720 SE 16th Av. #200

FILED Apr 03, 2008 8:00 am Secretary of State

04-03-2008 90075 002 ***138.75

60019501



02082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 42-1610256

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BOYD, SNOW 1720 SE 16TH AVE **BLDG 200** OCALA, FL 34471

DO NOT WRITE IN THIS SPACE

8.	The above named entity submit	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 and	int./	
			10-08
SI	GNATURE 7	λ 2 γ	18 0
٠.		· · · · · · · · · · · · · · · · · · ·	

FILE NOW!!!/FEE IS \$138.75 May 1, 2008/Fee will be \$538.75

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BOYD, ROY THAD III 1720 SE 16TH AVE BLDG 200 OCALA, FL 34471
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

DO NOT WRITE IN THIS SPACE

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 1 am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

INTED NAME OF SIGNING MANAGING MEMBER, OR ANTHORIZED REPRESENTATIV