

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 14, 2006 8:00 am
Secretary of State

07-14-2006 90092 050 ****55.00

DOCUMENT # L04000009110

1. Entity Name
MMS MARINAS II, LLC



Principal Place of Business
**1801 SOUTH FEDERAL HWY
SUITE 200
BOCA RATON, FL 33432**

Mailing Address
**1801 SOUTH FEDERAL HWY
SUITE 200
BOCA RATON, FL 33432**

2. Principal Place of Business
**200 W. PALMETTO PK
Suite, Apt. #, etc.
#302**

3. Mailing Address
**200 W PALMETTO PARK
Suite, Apt. #, etc.
SUITE 302**

City & State
BOCA RATON FL

City & State
BOCA RATON FL 33432

Zip
33432

Country
PALM BCH

Zip
33432

Country
PALM BCH

07112006 Chg-LLC CR2E083 (11/05)

4. FEI Number
20-0737674

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

**KISSMAN, DENNIS P
1801 SOUTH FEDERAL HWY
SUITE 200
BOCA RATON, FL 33432**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)
200 W PALMETTO PARK

SUITE 302

City
BOCA RATON

FL

Zip Code
33432

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 *Dennis P. Kissman* **DENNIS P. KISSMAN**

7/11/06
DATE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$50.00
Due by September 6, 2006**

**Make check payable to
Florida Department of State**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**MGR
KISSMAN, DENNIS P
1801 SOUTH FEDERAL HWY, SUITE 200
BOCA RATON, FL 33432** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**200 W. PALMETTO PARK SUITE 302
BOCA RATON FL 33432** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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: *Dennis P. Kissman* **DENNIS P. KISSMAN**

7/11/06
Date

561-338-5800
Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE