2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000031086

Jul 11, 2007 Secretary of State

Entity Name: CAPITAL GROWTH ASSET BASED BRIDGE LOAN FUND II, LLC

Current Principal Place of Business: New Principal Place of Business:

225 MIZNER BOULEVARD STE 750 1200 NO FEDERAL HWY SUITE 400

BOCA RATON, FL 33432 BOCA RATON, FL 33432

Current Mailing Address: New Mailing Address:

225 MIZNER BOULEVARD STE 750 1200 NO FEDERAL HWY SUITE 400

BOCA RATON, FL 33432 BOCA RATON, FL 33432

FEI Number: 20-1052751 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

JACOBS, MICHAEL 225 NE MIZNER BLVD STE. 750

JACOBS, MICHAEL 1200 NO FEDERAL HWY SUITE 400 BOCA RATON, FL 33432 BOCA RATON, FL 33432

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.

ADDITIONS/CHANGES:

SIGNATURE: 07/11/2007

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete (X) Change () Addition

CAPTIAL GROWTH INVES, TMENT FUND ADV I SORS, L CAPTIAL GROWTH INVES, TMENT FUND ADV I SORS, L Name: Name:

Address: 225 MIZNER BOULEVARD STE 750 Address: 1200 NO FEDERAL HWY SUITE 400

City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete Title: (X) Change () Addition Name: CAPITAL ACCESS GROUP, LLC Name: CAPITAL ACCESS GROUP, LLC Address: 95 SOUTH FEDERAL HIGHWAY STE. 200 Address: 1200 NO FEDERAL HWY SUITE 400

City-St-Zip: BOCA RATON, FL 33432 City-St-Zip: BOCA RATON, FL 33432

Title: MGRM () Delete Title: () Change () Addition

CROSSROADS COLLATERA, L MANGEMENT FU N D, LLC Name: Name: 2201 N.W. CORPORATE BLVD. Address: Address: City-St-Zip: BOCA RATON, FL 33431 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JACOBS, MICHAEL **MGRM** 07/11/2007