2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

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DOCUMENT # L04000040703

Entity Name

COLÚMBIA APARTMENTS II, L.L.C.



Principal Place of Business

2901 W BUSCH BLVD

STE 901

TAMPA, FL 33618 US

Mailing Address

2901 W BUSCH BLVD

STE 901

TAMPA, FL 33618 U

FILED Apr 29, 2008 8:00 am Secretary of State

04-29-2008 90023 023 ***143.75

60031304



01082008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 20-2515933 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BEKIEMPIS, VINCENT 2901 W BUSCH BLVD STE 901 TAMPA, FL 33618

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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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

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

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BEKIEMPIS, VINCENT 2901 W BUSCH BLVD STE 901 TAMPA, FL 33618
NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-2IP	
NAME STREET ADDRESS CITY-ST-ZIP	
NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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 the 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 of the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

NAME OF SIGNATO MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

4/23/08

915-9727

Daytime Phone #