

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000056250

Entity Name: MARION BAY II, LLC

FILED
Apr 02, 2009
Secretary of State

Current Principal Place of Business:

8825 EAST TAMIAMI TRAIL
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

8825 EAST TAMIAMI TRAIL
NAPLES, FL 34113

New Mailing Address:

FEI Number: 20-2714285

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, CONSTANCE
1107 WEST MARION AVE STE 112
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

BURKE, CONSTANCE M
247 N COLLIER BLVD
SUITE 202
MARCO ISLAND, FL 34145 US

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.

SIGNATURE: CONSTANCE M. BURKE

04/02/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: V () Delete
Name: BOFF, JOSEPH D
Address: 8825 EAST TAMIAMI TRAIL
City-St-Zip: NAPLES, FL 34113

Title: P () Delete
Name: DELANGE, LUIT
Address: 8825 EAST TAMIAMI TRAIL
City-St-Zip: NAPLES, FL 34113

Title: T () Delete
Name: BOBROW, JOEL I MR
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: S () Delete
Name: DE LANGE-GARNER, ULRIKE MRS
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES:

Title: P (X) Change () Addition
Name: BOFF, JOSEPH D
Address: 8825 EAST TAMIAMI TRAIL
City-St-Zip: NAPLES, FL 34113

Title: VP (X) Change () Addition
Name: BOBROW, JOEL I
Address: 8825 EAST TAMIAMI TRAIL
City-St-Zip: NAPLES, FL 34113

Title: T (X) Change () Addition
Name: BOBROW, JOEL I
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

Title: S (X) Change () Addition
Name: DE LANGE-GARNER, ULRIKE
Address: 8825 TAMIAMI TRAIL EAST
City-St-Zip: NAPLES, FL 34113

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: JOEL I. BOBROW

VP

04/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date