## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000075294

FILED Jan 09, 2009 Secretary of State

Entity Name: ROSS MATZ INVESTMENTS WINSTON PARK PHASE II, LLC

| Current Principal Place of Business:          |   |                                      | New Principal Place of Business:            |   |  |
|---|---|--------------------------------------|---|---|--|
|   | NIVERSITY DR  | VE                                   |   |   |  |
| 210<br>DAVIE, FL                              | . 33328 US  |                                      |   |   |  |
| Current Mailing Address:                      |   |                                      | New Mailing Address:                        |   |  |
|   | NIVERSITY DR  | VE                                   |   |   |  |
| 210<br>DAVIE, FL                              | . 33328 US  |                                      |   |   |  |
| FEI Number                                    | : 20-1773957  | FEI Number Applied For ( )           | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )         |  |
| Name and Address of Current Registered Agent: |   |                                      | Name and Address                            | Name and Address of New Registered Agent: |  |
| 3325 S. UI<br>210<br>DAVIE, FL<br>The above   | ALTY INVESTM<br>NIVERSITY DR<br>. 33328 US<br>e named entity s<br>e of Florida. | VE                                   | purpose of changing its register            | ed office or registered agent, or both    |  |
| SIGNATU                                       | RE:   |                                      |   |   |  |
|   |   | c Signature of Registered Ag         | ent   | Date                                      |  |
| MANAGING MEMBERS/MANAGERS:                    |   |                                      | ADDITIONS/CHANGES:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | ROSS, BARRY   | Delete<br>SITY DRIVE SUITE 210<br>28 | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:   | MATZ, WILLIAŃ   | SITY DRIVE SUITE 210                 | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                     |  |

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: BARRY ROSS MGR 01/09/2009