2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L05000006116

1. Entity Name
PALM BAY DEVELOPERS II, LLC

Mailing Address

Principal Place of Business C/O HARVARD APARTMENTS 1501 HARVARD CIRCLE MELBOURNE, FL 32905

C/O HARVARD APARTMENTS 1501 HARVARD CIRCLE MELBOURNE, FL 32905

FILED Mar 19, 2007 08:00 AM Secretary of State



01182007 No Chg-LLC

CR2E083 (11/05)

Daytime Phone è

	4. FEI Number	 Applied For
İ	20-4134951	Not Applicable
	5. Certificate of Status Desired	\$5.00 Additional

6. Name and Address of Current Registered Agent

KIPPER, DAVID C/O HARVARD APARTMENTS 1501 HARVARD CIRCLE MELBOURNE, FL 32905 DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and sitted applicable.	(NOTE: Registered Agent signature required when reinstating)	CATE		
Filing Fee is \$50.00 Due by May 1, 2007		U00000671800 03/28/07-80043-009 50.00			
9.	MANAGING MEMBERS/MANAGERS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM WILF, LEONARD A 820 MORRIS TRN PKE SHORT HILLS, NJ 07078				
THTLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NO	T WRITE		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
CITY-ST-ZIP	certify that the information supplied with this filing does not on this report is true and accurate and that my signature solllify company or the receiver or tudstee empowered to exe	qualify for the exemptions contained in Chapter 119, Florid, half have the same legal effect as if made under oath; that cute this report as required by Chapter 698, Florida, Statute	a Statutes. I further certify that the information I am a managing member or manager of the		

ER, OR AUTHORIZED REPRESENTATIVE

8. The above named epity 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