

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000011930

FILED
Feb 18, 2008
Secretary of State

Entity Name: CONSOLIDATED CAPITAL FUNDING II, LLC

Current Principal Place of Business:

217 N WESTMONTE DRIVE
#1007
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

217 N WESTMONTE DRIVE
#1007
ALTAMONTE SPRINGS, FL 32714

New Mailing Address:

FEI Number: 20-3736558

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GRAY, N. DWAYNE JR., ESQ
C/O GREENSPAN, MARDER, ET AL
201 EAST PINE STREET, SUITE 500
ORLANDO, FL 32801 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: ZBOROWSKI, MARK
Address: 271 MADISON AVE., SUITE 1400
City-St-Zip: NEW YORK, NY 10016

Title: MGR () Delete
Name: CASSATA, ROSARIO
Address: 271 MADISON AVE., SUITE 1400
City-St-Zip: NEW YORK, NY 10016

Title: MGR () Delete
Name: HEINLEIN, GEORGE
Address: 271 MADISON AVE., SUITE 1400
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: GILARDI, MICHAEL M
Address: 1417 SHADWELL CIRCLE
City-St-Zip: HEATHROW, FL 32746

Title: MGR (X) Change () Addition
Name: CASSATA, ROSARIO
Address: 640 JOHNSON AVENUE, SUITE 5
City-St-Zip: BOHEMIA, NY 11716

Title: MGR (X) Change () Addition
Name: HEINLEIN, GEORGE
Address: 888 VETERANS MEMORIAL HIGHWAY, SUITE 430
City-St-Zip: HAUPPAUGE, NY 11788

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: MICHAEL M. GILARDI

MGR

02/18/2008

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