

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000027249

1. Entity Name
FORUM II, LLC



Principal Place of Business
TOWER PLACE 200, SUITE 675
3348 PEACHTREE ROAD, NE
ATLANTA, GA 30326

Mailing Address
TOWER PLACE 200, SUITE 675
3348 PEACHTREE ROAD, NE
ATLANTA, GA 30326

BK

FILED
07 AUG 31 PM 2:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



08292007 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
APPLIED FOR

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

D'JAMOOS, JENNIFER A
9130 CORSEA DEL FONTANA WAY
NAPLES, FL 34109

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Filing Fee is \$50.00
Due by September 14, 2007

BK

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

10. ADDITIONS/CHANGES

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
P
SONGY, DAVID B PRESIDE
3348 PEACHTREE RD
ATLANTA, GA 30326 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
MGRM
Songy Forum I Associates, LLC
3348 Peachtree Road, Suite 675
Atlanta, GA 30326 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
400109139904
09/06/07--01039--016 **55.00 ☐ Change ☐ Addition

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Chief Operating Officer of Songy Partners LLC, sole member of Songy Forum I Associates, LLC, MGRM of Forum II, LLC
8/2/07 404-995-8170

Date Daytime Phone #