



2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90035 002 ****50.00

DOCUMENT # L05000035410 1. Entity Name APOLLO WATERWAY PROPERTIES II, LLC					
Principal Place of Business 1474 JORDAN HILLS COURT CLEARWATER, FL 33756			Mailing Address 1474 JORDAN HILLS COURT CLEARWATER, FL 33756		
2. Principal Place of Business 4250 Central Avenue <small>Suite, Apt. #, etc.</small>		3. Mailing Address 4250 Central Avenue <small>Suite, Apt. #, etc.</small>			
City & State St. Petersburg FL		City & State St. Petersburg FL		4. FEI Number 20-2819828	
Zip 33711		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent BRUNSON, JOHN M 1474 JORDAN HILLS COURT CLEARWATER, FL 33756				7. Name and Address of New Registered Agent Name Brunson, John M. Street Address (P.O. Box Number is Not Acceptable) 4250 Central Avenue City St. Petersburg FL Zip Code 33711	
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 <u><i>John M Brunson</i></u> John M. Brunson 3-30-06 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$50.00 Due by May 1, 2006			Make check payable to Florida Department of State		
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE mgr NAME Stephan Charles P. STREET ADDRESS 6338 Shalimar St. CITY-ST-ZIP Port Charlotte FL 33981			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE mgr NAME Adw Properties II, LLC STREET ADDRESS 4250 Central Avenue CITY-ST-ZIP St. Petersburg FL 33711			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
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. Adw Properties II, LLC SIGNATURE: <u><i>John M Brunson</i></u> by: John M. Brunson, mgr. 3-30-06 (727) 828-0580 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #</small>					