

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000036166

**FILED**  
**Mar 29, 2012**  
**Secretary of State**

**Entity Name:** VAN ASTEN PROPERTIES II, LLC

**Current Principal Place of Business:**

441 RIVER EDGE LANE  
FRUIT COVE, FL 32259

**New Principal Place of Business:**

**Current Mailing Address:**

441 RIVER EDGE LANE  
FRUIT COVE, FL 32259

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WATSON, TODD  
7785 BAYMEADOWS WAY, STE 107  
JACKSONVILLE, FL 32256 US

**Name and Address of New Registered Agent:**

WATSON, TODD  
12276 SAN JOSE BOULEVARD  
SUITE 721  
JACKSONVILLE, FL 32223 US

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

03/29/2012

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: VAN ASTEN, ANNA MARIE  
Address: 441 RIVER EDGE LANE  
City-St-Zip: FRUIT COVE, FL 32259 US

Title: MGR  
Name: STARLING, TAMALA  
Address: 312 2ND ST  
City-St-Zip: ATLANTIC BEACH, FL 32233 US

I hereby 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: ANNA MARIE VAN ASTEN

MGRM

03/29/2012

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