

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000039905

FILED
May 01, 2006
Secretary of State

Entity Name: BOCAIRE PROPERTIES II, LLC

Current Principal Place of Business:

BRUCE EVANTER
17273 HUNTINGTON PARK WAY
BOCA RATON, FL 33484 US

New Principal Place of Business:

17273 HUNTINGTON PARK WAY
BOCA RATON, FL 33484 US

Current Mailing Address:

BRUCE EVANTER
17273 HUNTINGTON PARK WAY
BOCA RATON, FL 33484 US

New Mailing Address:

17273 HUNTINGTON PARK WAY
BOCA RATON, FL 33484 US

FEI Number: 20-2932530 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

TILLEY, MICHAEL R
2000 GLADES ROAD
SUITE 306
BOCA RATON, FL 33431 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: MGRM () Delete
Name: SIEGEL, STEPHEN
Address: 17273 HUNTINGTON PARK WAY
City-St-Zip: BOCA RATON, FL 33484 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: MGRM () Change (X) Addition
Name: EVANTER, BRUCE
Address: 17273 HUNTINGTON PARK WAY
City-St-Zip: BOCA RATON, FL 33496

I hereby certify that the information supplied with this filing does not qualify for the 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: BRUCE EVANTER

MGRM

05/01/2006

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