


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 13, 2007 08:00 AM
Secretary of State

DOCUMENT # L05000045747 1. Entity Name DEAC II LLC	
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Principal Place of Business 172 MORNING GLORY DRIVE LAKE MARY, FL 32746	Mailing Address 172 MORNING GLORY DRIVE LAKE MARY, FL 32746
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DO NOT WRITE IN THIS SPACE



07102007No Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2817255	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fees Required	

6. Name and Address of Current Registered Agent

DEAC, JOHN N
172 MORNING GLORY DRIVE
LAKE MARY, FL 32746

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR DEAC, JOHN N 172 MORNING GLORY DRIVE LAKE MARY, FL 32746
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEAC, JUDY C 172 MORNING GLORY DRIVE LAKE MARY, FL 32746
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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: J Deac Judy C Deac 7/10/07 407-767-5175
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #