

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 14, 2006 8:00 am
Secretary of State

03-14-2006 90202 025 ****50.00

DOCUMENT # L05000060020 1. Entity Name OCALA INVESTMENTS II, LLC								
Principal Place of Business 16669 TOPANGA LANE DELRAY BEACH, FL 33484			Mailing Address 16669 TOPANGA LANE DELRAY BEACH, FL 33484					
2. Principal Place of Business		3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.						
City & State		City & State						
Zip	Country	Zip	Country					
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent					
BILU, RON S 10 FAIRWAY DRIVE SUITE 304 DEERFIELD BEACH, FL 33441			Name MARIA NORTON Street Address (P.O. Box Number is Not Acceptable) 16669 TOPANGA LANE City DELRAY BEACH FL Zip Code 33484					
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>Maria Norton</u> MARIA NORTON DATE: <u>3/7/06</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)								
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 NAME STREET ADDRESS CITY-ST-ZIP	MGRM NORTON, MARIA 16669 TOPANGA LANE DELRAY BEACH, FL 33484	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MARIA NORTON 16669 TOPANGA LANE DELRAY BEACH, FL 33484	☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM TURNER, TOM 16669 TOPANGA LANE DELRAY BEACH, FL 33484	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ENTRUST BANK & TRUST FBO TOM TURNER 16669 TOPANGA LANE DELRAY BEACH, FL 33484	☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM LAVIOLA, CAMILLE 35 1/2 MT. HERMAN AVENUE OCEAN GROVE, NJ 07756	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM ENTRUST BANK & TRUST FBO MARIA NORTON 16669 TOPANGA LANE DELRAY BEACH, FL 33484	☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change ☐ Addition	
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: <u>Maria Norton</u> MARIA NORTON DATE: <u>3/7/06</u> 561-495-0689 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE								