

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L05000067420

FILED
Apr 22, 2009
Secretary of State**Entity Name:** FRIENDS OF DOLPHINS II, LLC**Current Principal Place of Business:**1025 N. BROADWAY AVE.
BARTOW, FL 33830**New Principal Place of Business:****Current Mailing Address:**113 SOUTH VALRICO ROAD
VALRICO, FL 33594**New Mailing Address:****FEI Number:** 03-0565791**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WEIS, CATHERINE D
113 SOUTH VALRICO ROAD
VALRICO, FL 33594 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: CHITTY, GLEN J
Address: 1025 N. BROADWAY AVE.
City-St-Zip: BARTOW, FL 33830**Title:** MGRM () Delete
Name: HIGH, PATRICK
Address: 1390 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33875**Title:** MGRM () Delete
Name: JAFFER, ANIL
Address: 113 S. VALRICO ROAD
City-St-Zip: VALRICO, FL 33594**Title:** () Delete
Name:
Address:
City-St-Zip:**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** MGR (X) Change () Addition
Name: CHITTY, GLEN J
Address: 1025 N. BROADWAY AVE.
City-St-Zip: BARTOW, FL 33830**Title:** MGR (X) Change () Addition
Name: HIGH, PATRICK
Address: 1390 LAKE JOSEPHINE DRIVE
City-St-Zip: SEBRING, FL 33875**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM () Change (X) Addition
Name: JAFFER, TAZINE
Address: 113 SOUTH VALRICO ROAD
City-St-Zip: VALRICO, FL 33594 US**Title:** MGRM () Change (X) Addition
Name: WEIS, CATHERINE D
Address: 113 SOUTH VALRICO ROAD
City-St-Zip: VALRICO, FL 33594 US

I hereby certify that the information supplied with this filing does not qualify 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: TAZINE JAFFER

MGRM

04/22/2009

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