## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L05000112879

Entity Name: SOUTH BEAR POINTE RANCHES II, LLC

FILED Aug 09, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 3689 GULFSTREAM WAY **DAVIE, FL 33328 Current Mailing Address: New Mailing Address:** 3689 GULFSTREAM WAY DAVIE, FL 33328 FFI Number: FEI Number Applied For (X) 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: Name and Address of New Registered Agent: LUNSFORD, LARRY W 3689 GULFSTREAM WAY DAVIE, FL 33328 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: ADDITIONS/CHANGES: MGRM Title: () Change () Addition () Delete LUNSFORD, LARRY W Name: Name: 3689 GULFSTREAM WAY Address: Address: City-St-Zip: DAVIE, FL 33328 US City-St-Zip: Title: MBR Title: MGR (X) Change ( ) Addition ( ) Delete LUNSFORD, LYNETTE R Name: LUNSFORD, LYNETTE R Name: Address: 3689 GULFSTREAM WAY Address: 3689 GULFSTREAM WAY City-St-Zip: DAVIE, FL 33328 US City-St-Zip: DAVIE, FL 33328 US Title: MBR () Delete Title: MGR (X) Change ( ) Addition BONFIGLIO, CHARLES SR BONFIGLIO, CHARLES SR Name: Name: Address: 866 MARINA DRIVE Address: 866 MARINA DRIVE City-St-Zip: WESTON, FL 33327 US City-St-Zip: WESTON, FL 33327 US Title: MBR ( ) Delete Title: MGR (X) Change ( ) Addition Name: BONFIGLIO, ROBERTA Name: BONFIGLIO, ROBERTA 866 MARINA DRIVE Address: 866 MARINA DRIVE Address: City-St-Zip: WESTON, FL 33327 US City-St-Zip: WESTON, FL 33327 US Title: MBR () Delete Title: MGR (X) Change ( ) Addition WEISS, RICHARD WEISS, RICHARD Name: Name: 465 SHAGBARK COURT 465 SHAGBARK COURT Address: Address: City-St-Zip: ROSELLE, IL 60172 US City-St-Zip: ROSELLE, IL 60172 US Title: () Delete Title: (X) Change ( ) Addition WEISS FILL WEISS FILL Name: Name: Address: 465 SHAGBARK COURT Address: 465 SHAGBARK COURT ROSELLE, IL 60172 US City-St-Zip: ROSELLE, IL 60172 US City-St-Zip:

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: LARRY LUNSFORD MGRM 08/09/2007