

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L05000114971

1. Entity Name
COLONIAL 40 II, LLC



Principal Place of Business
C/O FOLEY & LARDNER LLP
100 NORTH TAMPA STREET, SUITE 2700
TAMPA, FL 33602

Mailing Address
C/O FOLEY & LARDNER LLP
100 NORTH TAMPA STREET, SUITE 2700
TAMPA, FL 33602

2. Principal Place of Business
250 Gibraltar Road
Suite, Apt. #, etc.

3. Mailing Address
250 Gibraltar Road
Suite, Apt. #, etc.

City & State
Horsham, PA

City & State
Horsham, PA

Zip
19044

Country
USA

Zip
19044

Country
USA

04202006 Chg-LLC CR2E083 (11/05)

4. FEI Number

Applied For
☒ Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

F & L CORP.
ONE INDEPENDENT DRIVE, SUITE 1300
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

Name
C T Corporation System

Street Address (P.O. Box Number is Not Acceptable)
1200 South Pine Island Road

City
Plantation

FL

Zip Code
33324

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

Connie Bryan
Signature, typed or printed name of registered agent and title if applicable.

CONNIE BRYAN
SPECIAL ASSISTANT SECRETARY

(NOTE: Registered Agent signature required when reinstating)

DATE *4/21/2006*

Filing Fee is \$50.00
Due by May 1, 2006

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

10. ADDITIONS/CHANGES

TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Robert I. Toll 250 Gibraltar Road Horsham, PA 19044	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Zvi Barzilay 250 Gibraltar Road Horsham, PA 19044	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Joel H. Rassman 250 Gibraltar Road Horsham, PA 19044	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Mark J. Warshauer 250 Gibraltar Road Horsham, PA 19044	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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04/27/06--01003--012 **50.00

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Mark J. Warshauer, Vice President 215-938-8000

Date

Daytime Phone #