

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000002119

FILED  
Jul 04, 2008  
Secretary of State

**Entity Name:** CONCH HOUSE BUILDERS II, LLC

**Current Principal Place of Business:**

57 COMARES AVE  
ST. AUGUSTINE, FL 32080

**New Principal Place of Business:**

**Current Mailing Address:**

57 COMARES AVE  
ST. AUGUSTINE, FL 32080

**New Mailing Address:**

**FEI Number:** 43-2094694

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PONCE, DAVID M JR  
57 COMARES AVE  
ST. AUGUSTINE, FL 32080 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: MGR ( ) Delete  
Name: PONCE, DAVID M JR  
Address: 57 COMARES AVE  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: MGRM ( ) Delete  
Name: PONCE, DAVID M SR  
Address: 57 COMARES AVE  
City-St-Zip: ST. AUGUSTINE, FL 32080

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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:** DAVID PONCE JR

MM

07/04/2008

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