2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 30, 2009
Secretary of State

DOCUMENT# L06000021217

Entity Name: POLK FAMILY II LLC

Current Principal Place of Business:

660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950

New Mailing Address:

FEI Number: 20-4383326 **FEI Number Applied For ( )** **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:

POLK, CHARLES M III
660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950 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: POLK, CHARLES M III
Address: 660 CHARLOTTE ST
City-St-Zip: PUNTA GORDA, FL 33950

Title: MGRM ( ) Delete
Name: POLK, JEANNINE C
Address: 660 CHARLOTTE ST
City-St-Zip: PUNTA GORDA, FL 33950

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: C. MICHAEL POLK III MGRM 06/30/2009
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date