## 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L06000066112

Entity Name: OSEELA GROVES II, LLC

FILED Jan 19, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

515 S. FLAGLER DRIVE, SUITE 1900 515 N. FLAGLER DRIVE, SUITE 1900 WEST PALM BEACH, FL 33401 WEST PALM BEACH, FL 33401

Current Mailing Address: New Mailing Address:

515 S. FLAGLER DRIVE, SUITE 1900 WEST PALM BEACH, FL 33401 515 N. FLAGLER DRIVE, SUITE 1900 WEST PALM BEACH, FL 33401

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

BOOSE, WILLIAM R III 515 NORTH FLAGLER DRIVE, SUITE 1900 WEST PALM BEACH, FL 33401 US

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:

Title: MGR ( ) Delete Title: MGR (X) Change ( ) Addition

Name:BOOSE, WILLIAM R IIIName:BOOSE, WILLIAM R IIIAddress:515 S. FLAGLER DRIVE, SUITE 1900Address:515 N. FLAGLER DRIVE, SUITE 1900

Address: 515 S. FLAGLER DRIVE, SUITE 1900 Address: 515 N. FLAGLER DRIVE, SUITE City-St-Zip: WEST PALM BEACH, FL 33401 City-St-Zip: WEST PALM BEACH, FL 33401

I hereby certify that the information supplied with this filing does not qualify for the 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: WILLIAM R. BOOSE, III MGR 01/19/2007