2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L06000106001 02-05-2007 90203 004 ****50.00 **GALLERY BUILT HOMES II. LLC** Principal Place of Business Mailing Address 1439 S POMPANO PARKWAY STE 300 1439 S POMPANO PARKWAY STE 300 POMPANO BEACH, FL 33069 POMPANO BEACH, FL 33069 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122007 Chg-LLC CR2E083 (12/06) City & State Applied For City & State 4. FEI Number Not Applicable Zip Country Zip Country \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Neme UPCHURCH, JAMES R JR 1439 S POMPANO PARKWAY STE 300 Street Address (P.O. Box Number is Not Acceptable) POMPANO BEACH, FL 33069 -Zip Code 1. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am tamiliar with, and accept the obligations of registered agent. SIGNATURE Sgnature, typed or printed name of requisired agent and time if applicable. (NOTE: Registered Agent aignature required when reinstating) Filing Fee is \$50.00 Due by May 1, 2007 Make check payable to Florida Department of State MANAGING MEMBERS/MANAGERS 9. ADDITIONS/CHANGES 10 TITLE managing member out HILE ☐ Change ☐ Addition James Royer Updard, J. 1439 50. Pompano Brack, Fl. 3306 NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP TILE ☐ Delete ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADORESS CITY-ST-ZIP COV. ST. 7P TILE ☐ Delete TITLE ☐ Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MANAGE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-71P TITLE ☐ Delete TIRE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-702 TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS

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 eath; 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.

CITY-ST-7IP

CICHATURE. Mary

CITY-ST-78P

1/17/67

FILED Feb 28, 2007 8:00 am Secretary of State