

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000110173

FILED  
Apr 02, 2009  
Secretary of State

Entity Name: MADISON AVENUE LEGACY, II, LLC

## Current Principal Place of Business:

4 PORTOFINO DRIVE  
SUITE 901  
PENSACOLA BEACH, FL 32561

## New Principal Place of Business:

## Current Mailing Address:

4 PORTOFINO DRIVE  
SUITE 901  
PENSACOLA BEACH, FL 32561

## New Mailing Address:

FEI Number: 59-3814162

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SHANE, RAYMOND  
4 PORTOFINO DRIVE  
SUITE 901  
PENSACOLA BEACH, FL 32561 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: SHANE, RAYMOND  
Address: 4 PORTOFINO DRIVE, SUITE 901  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: MGR ( ) Delete  
Name: BAINES, JOHN L  
Address: 1 PORTOFINO DRIVE, SUITE 1308  
City-St-Zip: PENSACOLA BEACH, FL 32561

Title: MGR (X) Delete  
Name: SHANE, GLENN D  
Address: 3 PORTOFINO DRIVE, SUITE 1909  
City-St-Zip: PENSACOLA BEACH, FL 32561

## ADDITIONS/CHANGES:

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

Title: MGR (X) Change ( ) Addition  
Name: SHANE, GLENN  
Address: 2 PORTOFINO DRIVE SUITE 707  
City-St-Zip: PENSACOLA BEACH, FL 32561

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: RAYMOND SHANE

MGRM

04/02/2009

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