

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000116728

FILED
Apr 29, 2008
Secretary of State

Entity Name: CHC VENETIAN ISLES II, LLC

Current Principal Place of Business:

161 ST. ANTHONY AVENUE, STE. 820
ST. PAUL, MN 55103

New Principal Place of Business:

Current Mailing Address:

161 ST. ANTHONY AVENUE, STE. 820
ST. PAUL, MN 55103

New Mailing Address:

FEI Number: 20-8660304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: LANDWEHR, SUSAN M
Address: 161 ST. ANTHONY AVENUE, STE. 820
City-St-Zip: ST. PAUL, MN 55103

Title: MGR () Delete
Name: NELSON, NORMAN JR.
Address: 905 CREEKDALE DRIVE
City-St-Zip: RICHARDSON, TX 75080

Title: MGR () Delete
Name: MONTEZ, JAMES
Address: 801 NICOLLET MALL, STE. 1825
City-St-Zip: MINNEAPOLIS, MN 55402

Title: MGR () Delete
Name: MARTIN, RICHARD
Address: 1/2 BATTLE CREEK ROAD
City-St-Zip: ST. PAUL, MN 55119

ADDITIONS/CHANGES:

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

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

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

Title: MGR (X) Change () Addition
Name: MARTIN, RICHARD
Address: 952 GOODRICH AVENUE APT 1
City-St-Zip: ST. PAUL, MN 55105

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: SUSAN M. LANDWEHR

MGR

04/29/2008

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