

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000016699

**FILED**  
**Mar 18, 2010**  
**Secretary of State**

**Entity Name:** RENAISSANCE PRESERVE II, LLC

**Current Principal Place of Business:**

4224 MICHIGAN AVENUE  
FORT MYERS, FL 33916 US

**New Principal Place of Business:**

4224 RENAISSANCE PRESERVE WAY  
FORT MYERS, FL 33916 US

**Current Mailing Address:**

4224 MICHIGAN AVENUE  
FORT MYERS, FL 33916 US

**New Mailing Address:**

4224 RENAISSANCE PRESERVE WAY  
FORT MYERS, FL 33916 US

**FEI Number:** 26-3241707

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SAXON, BERNICE S ESQ.  
201 EAST KENNEDY BOULEVARD  
SUITE 600  
TAMPA, FL 33602 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  
Name: HOUSING AUTHORITY OF THE CITY OF FT. MYERS  
Address: 4224 MICHIGAN AVENUE  
City-St-Zip: FORT MYERS, FL 33916 US

I hereby 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: MARCUS D. GOODSON

ED

03/18/2010

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