

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000047473

FILED
Mar 10, 2008
Secretary of State

Entity Name: FOOTE II, LLC

Current Principal Place of Business:

4643 CLYDE MORRIS BLVD, UNIT 304
PORT ORANGE, FL 32129

New Principal Place of Business:

4643 S. CLYDE MORRIS BLVD, UNIT 304
PORT ORANGE, FL 32129 US

Current Mailing Address:

18 PINE VALLEY CIRCLE
ORMOND BEACH, FL 32174

New Mailing Address:

4643 S. CLYDE MORRIS BLVD, UNIT 304
PORT ORANGE, FL 32129 US

FEI Number: 20-8991680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

FOOTE, JAMES J
18 PINE VALLEY CIRCLE
ORMOND BEACH, FL 32174 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: FOOTE, JAMES J
Address: 18 PINE VALLEY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: MGR () Delete
Name: FOOTE, CYNTHIA K
Address: 18 PINE VALLEY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FOOTE, JAMES J
Address: 18 PINE VALLEY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGR (X) Change () Addition
Name: FOOTE, CYNTHIA K
Address: 18 PINE VALLEY CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174 US

Title: MGR () Change (X) Addition
Name: SENATRO, TIMOTHY J
Address: 1810 TAYLOR ROAD
City-St-Zip: PORT ORANGE, FL 32128 US

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: JAMES FOOTE

MGR

03/10/2008

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