

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000080534

FILED
Apr 30, 2009
Secretary of State

Entity Name: DEBT REMEDY PARTNERS II, LLC

Current Principal Place of Business:

951 BROKEN SOUND PARKWAY
BOCA RATON, FL 33487

New Principal Place of Business:

2901 CLINT MOORE ROAD
SUITE 200
BOCA RATON, FL 33496

Current Mailing Address:

951 BROKEN SOUND PARKWAY
BOCA RATON, FL 33487

New Mailing Address:

2901 CLINT MOORE ROAD
SUITE 200
BOCA RATON, FL 33496

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

WEINTRAUB, JAMES
951 BROKEN SOUND PARKWAY
BOCA RATON, FL 33487 US

Name and Address of New Registered Agent:

WEINTRAUB, JAMES
7777 GLADES ROAD
SUITE 210
BOCA RATON, FL 33434 US

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: JAMES L. WEINTRAUB 04/30/2009

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MAHLER, DAVID
Address: 951 BROKEN SOUND PARKWAY
City-St-Zip: BOCA RATON, FL 33487 US

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: MAHLER, DAVID
Address: 2901 CLINT MOORE ROAD, SUITE 200
City-St-Zip: BOCA RATON, FL 33496 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: DAVID MAHLER MGR 04/30/2009

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