

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000092566

FILED  
Feb 26, 2010  
Secretary of State

Entity Name: MCNA PROPERTIES II, LLC

**Current Principal Place of Business:**

220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134 US

**New Principal Place of Business:**

**Current Mailing Address:**

220 ALHAMBRA CIRCLE  
CORAL GABLES, FL 33134 US

**New Mailing Address:**

FEI Number: 58-1846933      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

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

CTC MANAGEMENT SERVICES, LLC  
220 ALHAMBRA CIRCLE, 11TH FLOOR  
CORAL GABLES, FL 33134 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: P  
Name: WILSON, MILLAR  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: T  
Name: PERAZA, ALBERTO  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: VP  
Name: HOLDEN, EDWARD  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 US

Title: SO  
Name: TRUJILLO, IVAN  
Address: 220 ALHAMBRA CIRCLE  
City-St-Zip: CORAL GABLES, FL 33134 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: IVAN TRUJILLO

SO

02/26/2010

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