

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000100107

Entity Name: TWIN ROCKS II, LLC

FILED  
Jul 17, 2009  
Secretary of State

**Current Principal Place of Business:**

154 LAWN AVENUE  
ST. AUGUSTINE, FL 32084

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1389  
ST. AUGUSTINE, FL 32084

**New Mailing Address:**

FEI Number: 26-4376612      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

DAVENPORT, GARY B  
1280-B PONCE DE LEON BLVD NORTH  
ST AUGUSTINE, FL 32084      US

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

DAVENPORT, GARY B  
77 SARAGOSSA  
ST AUGUSTINE, FL 32084      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: JESSE KILLEBREW

07/17/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KILLEBREW, JESSE P  
Address: 154 LAWN AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

Title: MGRM ( ) Delete  
Name: KILLEBREW, JASON  
Address: 154 LAWN AVENUE  
City-St-Zip: ST. AUGUSTINE, FL 32084

**ADDITIONS/CHANGES:**

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

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

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: JESSE KILLEBREW

MGR

07/17/2009

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