

2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000118322

Entity Name: KLP LOST RIVER II LLC

FILED
Mar 05, 2010
Secretary of State

Current Principal Place of Business:

701 S. OLIVE AVENUE, SUITE 104
WEST PALM BEACH, FL 33401

New Principal Place of Business:

Current Mailing Address:

701 S. OLIVE AVENUE, SUITE 104
WEST PALM BEACH, FL 33401

New Mailing Address:

FEI Number: 27-1480355

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 323012525 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
Name: CLARKE, MICHAEL
Address: 701 S. OLIVE AVENUE, SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR
Name: ERBSTEIN, HOWARD
Address: 701 S. OLIVE AVENUE, SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR
Name: JULIEN, ROBERT
Address: 701 S. OLIVE AVENUE, SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33401

Title: MGR
Name: JOHNSON, WILLIAM
Address: 701 S. OLIVE AVENUE, SUITE 104
City-St-Zip: WEST PALM BEACH, FL 33401

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: MICHAEL CLARKE

MGR

03/05/2010

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