

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
May 02, 2008 08:00 AM
Secretary of State

DOCUMENT # L99000006Q20 1. Entity Name CBA PROPERTIES II LLC	
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Principal Place of Business 331 SOUTH FLORIDA AVENUE STE 400 LAKELAND, FL 33801-4626	Mailing Address 331 SOUTH FLORIDA AVENUE STE 400 LAKELAND, FL 33801-4626
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DO NOT WRITE IN THIS SPACE



04212008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 59-3598967	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent ATKINSON, RONALD C 331 SOUTH FLORIDA AVENUE STE 400 LAKELAND, FL 33801-4626
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U000000944153
05/29/08 80086 023 138.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR ATKINSON, RONALD C 331 SOUTH FLORIDA AVENUE STE 400 LAKELAND, FL 338014626
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR BELCOURT, LLEWELLYN N 331 SOUTH FLORIDA AVENUE STE 400 LAKELAND, FL 338014626
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IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: PcCth 4/30/08 863 687 4010
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #