


**2005 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 27, 2005 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M01000000040</b> 1. Entity Name <b>VANGUARD RETAIL II, LLC</b>	
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Principal Place of Business <b>1900 THE EXCHANGE, STE. 180 ATLANTA, GA 30339</b>	Mailing Address <b>1900 THE EXCHANGE, STE. 180 ATLANTA, GA 30339</b>
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**DO NOT WRITE IN THIS SPACE**



03232005 No Chg-LLC

CR2E083 (10/03)

4. FEI Number <b>58-2587661</b>	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  <b>NEAL, TERRY T P.A. 1330 W. CITIZENS BLVD., STE. 701 LEESBURG, FL 34748</b>
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

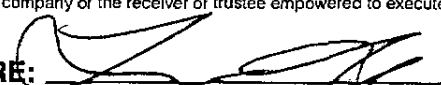
**Filing Fee is \$50.00  
Due by May 1, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MGRM VANGUARD ASSOC. INC. 1900 THE EXCHANGE STE. 180 ATLANTA, GA 30339</b>
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**DO NOT WRITE  
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04/27/05-80140-014 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:**  **4/21/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Days/Phone #