## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M01000001354

1. Entity Name YAIR II, LLC

FILED
May 01, 2006 08:00 A
Secretary of State

Principal Place of Business

220 BUSH STREET, SUITE 1100 SAN FRANCISCO, CA 94104 Mailing Address

220 BUSH STREET, SUITE 1100 SAN FRANCISCO, CA 94104



04212006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 94-3402497 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

KEYES, WILLIAM A JR. 2125 FIRST STREET, SUITE 101 FORT MYERS, FL 33901

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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 registored agent and stile if applicable.	(NOTE Registered Agent algorature required when reinstating)	DATE
Filing Fee is \$50.00 Due by May 1, 2006			
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HERMES INVESTMENT CO., INC. P.O. BOX 790 FORT MYERS, FL 339020790		U00000549965
Title Name Street address City-St-Zip			05/13/06-80040-024 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO	NOT WRITE
THTLE NAME STREET ADDRESS CITY-ST-ZIP		IN	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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 inclicated on this report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 508, Florida Statutes.

AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE