

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003512

FILED
Jan 26, 2007
Secretary of State

Entity Name: BRISTOL NORTHERN INDUSTRIAL II LLC

Current Principal Place of Business:

BRISTOL GROUP, INC.
400 MONTGOMERY ST., SUITE 400
SAN FRANCISCO, CA 94104

New Principal Place of Business:

BRISTOL GROUP, INC.
400 MONTGOMERY STREET, SUITE 400
SAN FRANCISCO, CA 94104

Current Mailing Address:

BRISTOL GROUP, INC.
400 MONTGOMERY ST., SUITE 400
SAN FRANCISCO, CA 94104

New Mailing Address:

BRISTOL GROUP, INC.
400 MONTGOMERY STREET, SUITE 400
SAN FRANCISCO, CA 94104

FEI Number: 52-2391445

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 () Delete
Name: BRISTOL GROUP, INC.,
Address: 400 MONTGOMERY ST., SUITE 400
City-St-Zip: SAN FRANCISCO, CA 94104

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: BRISTOL GROUP, INC.,
Address: 400 MONTGOMERY STREET, SUITE 400
City-St-Zip: SAN FRANCISCO, CA 94104

I hereby certify that the information supplied with this filing does not qualify for the 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: TODD J. MCLAY

CFO

01/26/2007

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