## 😹 🗜 2006 LIMITED LIABILITY COMPANY

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## **FILED** Jul 24, 2006 08:00 AN Secretary of State

ANNUAL REPORT	
DOCUMENT # M0500001519	

1. Entity Name VILLANOVA JV II, LLC



Principal Place of Business

4706 18TH AVENUE BROOKLYN, NY 11204 Mailing Address

4706 18TH AVENUE BROOKLYN, NY 11204



07192006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2494236

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

LIEBER, OREN D ESQ. 555 N.E. 15TH STREET, SUITE 100 MIAMI, FL 33132

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	named entity submits this statement for the purpose of chains of registered agent.	inging its registered office or registered agent, or	both, in the State of Florida. 1 am familiar with, and accept
SIGNATURE	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
Fil Due I	ling Fee Is \$50.00 by September 6, 2006		U00000571940 07/25/06-80009-012 50.00
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR RW VILLANOVA, LLC 4706 18TH AVENUE BROOKLYN, NY 11204		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			,
TITLE NAME STREET ADDRESS CITY-SI-ZIP		DC	NOT WRITE
TITLE NAME STREET ADDRESS		IN	THIS SPACE

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 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:

TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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

Daytime Phone #