


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # M05000001519 1. Entity Name VILLANOVA JV II, LLC	
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Principal Place of Business 4706 18TH AVENUE BROOKLYN, NY 11204	Mailing Address 4706 18TH AVENUE BROOKLYN, NY 11204
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DO NOT WRITE IN THIS SPACE



07052007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 20-2494236	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$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	DO NOT WRITE IN THIS SPACE
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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 registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$50.00
Due by September 14, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR RW VILLANOVA, LLC 4706 18TH AVENUE BROOKLYN, NY 11204
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07/10/07-80014-004 50.00

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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: Taurice W. W. 7/5/07 718-972-7878
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #