

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000005729

Entity Name: CH NAPLES II, LLC

FILED
May 24, 2007
Secretary of State

Current Principal Place of Business:

CRESCENT VI
8400 E. CRESCENT PARKWAY, SUITE 475
GREENWOOD VILLAGE, CO 80111

New Principal Place of Business:

11101 W. 120TH AVENUE
SUITE 300
BROOMFIELD, CO 80021

Current Mailing Address:

CRESCENT VI
8400 E. CRESCENT PARKWAY, SUITE 475
GREENWOOD VILLAGE, CO 80111

New Mailing Address:

11101 W. 120TH AVENUE
SUITE 300
BROOMFIELD, CO 80021

FEI Number: 20-0624280 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

HINES, SAM
2431 ALOMA AVENUE, SUITE 110
WINTER PARK, FL 32792 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: CLUB HOLDINGS, LLC,
Address: CRESCENT VI, 8400 E. CRESCENT PKWY, #475
City-St-Zip: GREENWOOD VILLAGE, CO 80111

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CLUB HOLDINGS PROPER, TIES I, LLC
Address: 11101 W. 120TH AVENUE STE 300
City-St-Zip: BROOMFIELD, CO 80021

I hereby certify that the information supplied with this filing does not qualify 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: PATRICK M GREEN

VP

05/24/2007

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