## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# M07000003065

Entity Name: MIAMI AIRPORT COMPLEX II LLC

FILED Apr 17, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

410 SEVERN AVE 1997 ANNAPOLIS EXCHANGE PARKWAY STE 314

SUITE 550

ANNAPOLIS, MD 21401

**Current Mailing Address: New Mailing Address:** 

410 SEVERN AVE 1997 ANNAPOLIS EXCHANGE PARKWAY **STE 314** 

SUITE 550

ANNAPOLIS, MD 21401

ADDITIONS/CHANGES:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324

ANNAPOLIS, MD 21403

ANNAPOLIS, MD 21403

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: (X) Change ( ) Addition () Delete

REYNOLDS, WILLIAM H DUVA, VICTOR A MGRM Name: Name:

410 SEVERN AVENUE, SUITE 314 Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 550 Address:

City-St-Zip: ANNAPOLIS, MD 21403 City-St-Zip: ANNAPOLIS, MD 21401

Title: MGR () Delete Title: MGRM (X) Change ( ) Addition Name: WILES, BRUCE G Name: SCHWARTZ, JENNIFER A MGRM

Address: 410 SEVERN AVENUE, SUITE 314 Address: 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 550

City-St-Zip: ANNAPOLIS, MD 21403 City-St-Zip: ANNAPOLIS, MD 21401

Title: MGR () Delete Title: MGRM (X) Change ( ) Addition

WARFIELD, CARROLL M Name: THI IV MAC LLC Name:

410 SEVERN AVENUE, SUITE 314 1997 ANNAPOLIS EXCHANGE PARKWAY, SUITE 550 Address: Address:

City-St-Zip: ANNAPOLIS, MD 21403 City-St-Zip: ANNAPOLIS, MD 21401

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: JANE LOUIS 04/17/2009