

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # P95000088034

1. Entity Name
MJD VENTURES II, INC.



Principal Place of Business
301 W CAMINO GRDNS BLVD
BOCA RATON, FL 33432

Mailing Address
301 W CAMINO GRDNS BLVD
BOCA RATON, FL 33432



04212008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0645138

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DEMPSEY, W. GLENN
505 S FLAGLER DR
SUITE 1330
WEST PALM BEACH, FL 33401

**DO NOT WRITE
IN THIS SPACE**

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 _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BAILEY, GARY S
STREET ADDRESS	P O BOX 3244 N/A
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	D
NAME	BAILEY, JEFFREY H
STREET ADDRESS	380 E LIONSHEAD CIRCLE
CITY-ST-ZIP	VAIL, CO 81657
TITLE	D
NAME	BAILEY, DOUGLAS S
STREET ADDRESS	P O BOX 3244 N/A
CITY-ST-ZIP	TEQUESTA, FL 33469
TITLE	D
NAME	BAILEY, MARY M
STREET ADDRESS	5411 WATEKA DR
CITY-ST-ZIP	DALLAS, TX 75209
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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05/20/08-80069-019 150.00

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IN THIS SPACE**

12. 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE: _____ Gary S. Bailey

4/29/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #