

**2007 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED  
Jan 08, 2007  
Secretary of State**

DOCUMENT# L02000029712

Entity Name: BRAVE PROPERTY MANAGEMENT LLC

**Current Principal Place of Business:**

12545 LAKE DENISE BLVD.  
CLERMONT, FL 34711

**New Principal Place of Business:**

**Current Mailing Address:**

12545 LAKE DENISE BLVD.  
CLERMONT, FL 34711

**New Mailing Address:**

FEI Number: 43-2022422      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

LOWERY, DAVIS  
12545 LAKE DENISE BLVD.  
CLERMONT, FL 34711      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: P      ( ) Delete  
Name: LOWERY, DAVIS  
Address: 12545 LAKE DENISE BLVD.  
City-St-Zip: CLERMONT, FL 34711

Title: VP      ( ) Delete  
Name: LOWERY, NOELLE  
Address: 12545 LAKE DENISE BLVD  
City-St-Zip: CLERMONT, FL 34711

**ADDITIONS/CHANGES:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: NOELLE H. LOWERY

VP

01/08/2007

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