

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000069626

FILED  
Mar 12, 2009  
Secretary of State

Entity Name: BRM WATERFORD POINTE, LLC

**Current Principal Place of Business:**

495 N. KELLER RD, SUITE 301  
MAITLAND, FL 32751

**New Principal Place of Business:**

501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

**Current Mailing Address:**

495 N. KELLER RD, SUITE 301  
MAITLAND, FL 32751

**New Mailing Address:**

501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801

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

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

VOGT, LOUIS E  
495 N. KELLER RD, SUITE 301  
MAITLAND, FL 32751    US

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

VOGT, LOUIS E  
501 NORTH MAGNOLIA AVENUE  
ORLANDO, FL 32801    US

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: LOUIS E. VOGT

03/12/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title:            MGR            ( ) Delete  
Name:            VOGT, LOUIS E  
Address:        495 N. KELLER RD, SUITE 301  
City-St-Zip:    MAITLAND, FL 32751

Title:            MGR            ( ) Delete  
Name:            ZIMMERMAN, SCOTT  
Address:        495 N. KELLER RD, SUITE 301  
City-St-Zip:    MAITLAND, FL 32751

**ADDITIONS/CHANGES:**

Title:            MGR            (X) Change ( ) Addition  
Name:            VOGT, LOUIS E  
Address:        501 NORTH MAGNOLIA AVENUE  
City-St-Zip:    ORLANDO, FL 32801

Title:            MGR            (X) Change ( ) Addition  
Name:            ZIMMERMAN, SCOTT  
Address:        501 NORTH MAGNOLIA AVENUE  
City-St-Zip:    ORLANDO, FL 32801

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: LOUIS E. VOGT

MGR

03/12/2009

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