

# 2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M02000003179

Entity Name: BROADSTAR SOUTH, LLC

FILED  
Apr 06, 2005  
Secretary of State

**Current Principal Place of Business:**

1809 N. BLACK HORSE PIKE , B-3  
WILLIAMSTOWN, NJ 08094

**New Principal Place of Business:**

**Current Mailing Address:**

1809 N. BLACK HORSE PIKE , B-3  
WILLIAMSTOWN, NJ 08094

**New Mailing Address:**

13400 PERIWINKLE AVENUE  
SEMINOLE, FL 33776

FEI Number: 74-3068301

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

BLANCO, LAVERA  
13400 PERIWINKLE AVE  
SEMINOLE, FL 33776 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/MEMBERS:**

Title: MGR ( ) Delete  
Name: BELL, DOUGLAS  
Address: 1809 N. BLACK HORSE PIKE N BLDG. B-3  
City-St-Zip: WILLIAMSTOWN, NJ 08094

Title: MGR ( ) Delete  
Name: BELL, DOUGLAS  
Address: 53 FOX MEADOW D  
City-St-Zip: SICKLERVILLE, NJ 08081

**ADDITIONS/CHANGES:**

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

Title: MGR (X) Change ( ) Addition  
Name: ELLIOTT, RONALD  
Address: 1608 US HWY 1, #404  
City-St-Zip: NORTH PALM BEACH, FL 33408

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: DOUGLAS BELL

MGR

04/06/2005

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