2006 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2006

FILED
Feb 27, 2006 08:00 AM
Secretary of State

DOCUMENT # A09714

1. Entity Name
BRITTANY OF MICHIGAN, LTD.

Principal Place of Business	Mailing Address
5010 NE WALDO ROAD GAINESVILLE, FL 32609	21411 CIVIC CENTER DR., STE. 306 SOUTHFIELD, MI 48076

02112006 No Chg-LP CR2E003 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
38-2309057
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

MATHES, BARRY V SR.
5010 NE WALDO ROAD
GAINESVILLE, FL 32609

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

100000448067
03/08/06-80002-004 500.00

FILE NOW!!! FEE IS $500.00
After May 1, 2006, Fee will be $900.00

A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.

12. GENERAL PARTNER INFORMATION

DOCUMENT #	M01000001469
NAME	RISSMAN INVESTMENT COMPANY, L.L.C.
STREET ADDRESS	21411 CIVIC CENTER DR. #306
CITY-ST-ZIP	SOUTHFIELD, MI 48076
DOCUMENT #	
NAME	KORMAN, HARRY B
STREET ADDRESS	406 W. HILLSBORO BLVD.
CITY-ST-ZIP	DEERFIELD BEACH, FL 33441
DOCUMENT #	
NAME	DARIN, DENNIS JR.TRUSTEE
STREET ADDRESS	3504 WALBRI DR.
CITY-ST-ZIP	BLOOMFIELD HILLS, MI 48304
DOCUMENT #	
NAME	BRAVEMAN, ARTHUR
STREET ADDRESS	6069 NW 23RD AVE
CITY-ST-ZIP	BOCA RATON, FL 33496
DOCUMENT #	
NAME	PARVEN, HOWARD, TRUSTEE
STREET ADDRESS	995 TIMBERLAKE
CITY-ST-ZIP	BLOOMFIELD HILLS, MI
DOCUMENT #	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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STAPLE CHECK HERE

14. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes.

SIGNATURE: _____ 2-20-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER — Date — Daytime Phone #