


**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Apr 20, 2004 08:00 AM
Secretary of State

DOCUMENT # L00000002047 1. Entity Name BROOKS & FREUND, LLC	
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Principal Place of Business 6281 METRO PLANTATION RD. FORT MYERS, FL 33912	Mailing Address 6281 METRO PLANTATION RD. FORT MYERS, FL 33912
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DO NOT WRITE IN THIS SPACE

8. Name and Address of Current Registered Agent WOLLMAN, EDWARD E 5129 CASTELLO DR., STE. 1 NAPLES, FL 34103	DO NOT WRITE IN THIS SPACE
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9. 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 _____

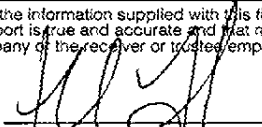
**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BROOKS, DONALD E 13762 PINE VILLA LANE FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM FREUND, RICHARD 8619 SO. LAKE CIRCLE FORT MYERS, FL 33908
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04/20/04-80058-015 50.00

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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:  _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date _____ Daytime Phone # _____