2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 17, 2006
Secretary of State

DOCUMENT# L01000008487

Entity Name: BRADFORD TERRACE, LLC

Current Principal Place of Business:

808 S. COLLEY
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

6865 N. LINCOLN AVENUE
LINCOLNWOOD, IL 60712

New Mailing Address:

FEI Number: 36-4447151 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GINSPARG, NORMAN J
12221 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161 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: MGRM ( ) Delete
Name: ESFORMES, MORRIS I
Address: 3737 WEST ARTHUR AVE.
City-St-Zip: LINCOLNWOOD, IL 60712

Title: MGRM ( ) Delete
Name: ROBERTS, SIDNEY
Address: 120 CHIPOLA AVE
City-St-Zip: DELAND, FL 32720

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: ESFORMES, MORRIS I
Address: 6865 N. LINCOLN AVENUE
City-St-Zip: LINCOLNWOOD, IL 60712

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: MORRIS ESFORMES MGRM 03/17/2006

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