


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2008 08:00 AM
Secretary of State

DOCUMENT # L01000019089 1. Entity Name USA BROADMOOR LEASECO, LLC	
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Principal Place of Business 405 N. ST. MARY'S ST. #850 SAN ANTONIO, TX 78205 US	Mailing Address 405 N. ST. MARY'S ST. #850 SAN ANTONIO, TX 78205 US
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02272008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 58-2664810	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent EVERETT, ANTHONY 5005 INTERBAY BOULEVARD TAMPA, FL 33611

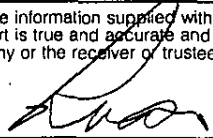
DO NOT WRITE IN THIS SPACE

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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR INTERNACIONAL REALTY, INC. 5005 INTERBAY BOULEVARD TAMPA, FL 33611
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR CARAWAY, JR., HUGH L 405 N. ST. MARY'S ST. #850 SAN ANTONIO, TX 78205
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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<p>000000930675 05/21/08-80118-013 138.75</p> <p>DO NOT WRITE IN THIS SPACE</p>
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11. 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 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:  L. Russo	Date 4-21-08	Daytime Phone #
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		