

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**May 03, 2007 08:00 A**  
**Secretary of State**

**DOCUMENT # L01000019093**

1. Entity Name  
**BROADMOOR NEWCO, LLC**



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**



02222007 No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**58-2664217**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

**Filing Fee is \$50.00  
Due by May 1, 2007**

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
INTERNATIONAL REALTY INC  
405 N ST MARY'S ST, STE 850  
SAN ANTONIO, TX 78205**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**MGR  
CARAWAY, HUGH L  
405 N. ST. MARY'S ST. #850  
SAN ANTONIO, TX 78205**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
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TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

**CONTROLLER**

**3-1-07**

Date

**210.250.1469**

Daytime Phone #