2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

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

FILED Feb 22, 2005 08:00 AM Secretary of State

DOCUMENT # L01000021787 1. Entity Name BRANTWOOD ASSOCIATES, LLC			Secretary of State
Principal Plac C/O SAMUEL 25 BERKELE ROCHESTER,	EY ST. 25 BERKELEY ST.		
	OO NOT WRITE IN THIS SPA	CE	01042005 No Chg-LLC CR2E083 (10/03) 4. FEI Number Applied For Not Applicable
	6. Name and Address of Current Registered Agent		5. Certificate of Status Desired
HRAWG CORP. 1801 N. MILITARY TRAIL, STE. 200 BOCA RATON, FL 33431			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, types or printed name of registered agent and title if applicable. (NOTE, Registered Agent signature required when reinstating) DATE Filling Fee is \$50.00 Due by May 1, 2005			
D	ue by may 1, 2005	1	
9. TITLE NAME STREET ADDRESS CITY-ST-ZIP	MANAGING MEMBERS/MANAGERS MGR TILTON, SAMUEL O 25 BERKELEY STREET ROCHESTER, NY 14607		000000239571 02/22/05-80051-018 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR JALALI, ANNE T 132 AMY CIRCLE FORT VALLEY, GA 31030		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TO A PERSON NAMED IN
TITLE NAME STREET ADDRESS GITY-ST-ZIP			The state of the s
11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.			