2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L02000003350

1. Entity Name BREVARD HOTEL ASSOCIATES, LEC



FILED Mar 13, 2006 08:00 AM Secretary of State

Principal Place of Business 5600 STATE ROAD 524

COCOA, FL 32926

Mailing Address P.O. BOX 321534

COCOA BEACH, FL 32932



DO NOT WRITE IN THIS SPACE

02132006 No Chg-LLC

CR2E083 (11/05)

4.	FEI Number
	74-3027600

Applied For Not Applicable

5. Certificate of Status Desired

☐ \$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

BURKE, MATTHEW T CPA 503 N. ORLANDO AVE SUITE #106 COCOA BEACH, FL 32931

the obligations of registered agent.

NAME STREET ADDRESS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

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SIGNATURE.	Signature, typed or printed name of registered agent and title it applicable.	* (NOTE: Registered Agent signature required when reinstating)	DATE
F D	lling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE	MGR		••
NAME	PARSONS, WILLIAM ROGER		
STREET ADDRESS	930 S HARBOR CITY BLVD STE 505	į.	
CITY-SI-ZIP	MELBOURNE, FL 32901		
TALE		· · · · · · · · · · · · · · · · · · ·	e de la companione de l
NAME		1	000000466811
Street address		l l	03/23/06-80026-010 50.00
City-st-zip		1	

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 1 am familiar with, and accept

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IN THIS SPACE

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4	 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
- 7	it instably carmy marine infiltration solities with this time according to the examplions committed in Public Life Section and the filter than
	indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under path; that I am a managing member or manager of the
	moreging of this report is the and accounte and that this state is said affect as it interest from that I all a trial and the said that it is the said of the country in that it is the said of the country in that it is the said of the country in the country in the said of the country in the
	limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.
	milling ligability combany or into receiver or stopics embowered to execute this rabout as reduced by combant defect of the receiver or stopics.

SIGNATURE: When I have of signing managing member, or authorized representative

3/9/04

321-783-2230

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