


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jan 26, 2007 08:00 AM
Secretary of State**

DOCUMENT # L03000002075 1. Entity Name MLJ BROOKSIDE, LLC	
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Principal Place of Business C/O HOWARD L. HOWELL 701 SPOTTIS WOOD LANE CLEARWATER, FL 33756	Mailing Address C/O HOWARD L. HOWELL 701 SPOTTIS WOOD LANE CLEARWATER, FL 33756
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01032007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 02-0668920	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 RAYMOND, J. PAUL 625 COURT STREET, STE. 200 CLEARWATER, FL 33756
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**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 renewing) DATE _____

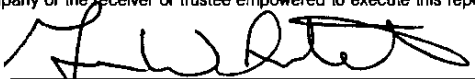
**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR HOWELL, HOWARD L 701 SPOTTIS WOOD LANE CLEARWATER, FL 33756
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR WHITEHEAD, B. GENE JR 240 PINE ROAD BELLEAIR, FL 33758
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/30/07-80027-014 50.00

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IN THIS SPACE**

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:  **1-8-07**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #