2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # L03000008939

1. Entity Name

LIBERTY DEVELOPMENT OF BREVARD, LLC



Principal Place of Business

Mailing Address

1269 U.S. 1

ROCKLEDGE, FL 32955

SIGNATURE:

1269 U.S. 1

ROCKLEDGE, FL 32955

FILED Apr 27, 2006 08:00 AN Secretary of State



04052006 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 05-0558458 Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A. 1840 S.W. 22ND STREET, 4TH FLOOR MIAMI, FL 33145

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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		(NOTE, Registered Agent signature required when reinstating)	DATE
Fi D	iling Fee is \$50.00 ue by May 1, 2006		
9.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR RAHAL, NICK N 1269 U.S. 1 ROCKLEDGE, FL 32955		000000539271 05/09/06-80092-012 50.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MACIK, JOSEPH J 1269 U.S. 1 ROCKLEDGE, FL 32955		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RAHAL, MELISSA M 1269 U.S. 1 ROCKLEDGE, FL 32955	DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MACIK, JONI KAY 1269 U.S. 1 ROCKLEDGE, FL 32955	IN	IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			

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