

# 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000011097

FILED  
Jan 06, 2004  
Secretary of State

**Entity Name:** BRANTHAN PROPERTIES, LLC

**Current Principal Place of Business:**

2480 OCEAN SHORE BLVD.  
UNIT 117  
ORMOND BEACH, FL 32176 US

**New Principal Place of Business:**

**Current Mailing Address:**

2480 OCEAN SHORE BLVD.  
UNIT 117  
ORMOND BEACH, FL 32176 US

**New Mailing Address:**

**FEI Number:** 42-1583703      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**MANAGING MEMBERS/MEMBERS:**

Title: MGRM ( ) Delete  
Name: KURTZ, FREDERICK A  
Address: 2480 OCEAN SHORE BLVD., UNIT 117  
City-St-Zip: ORMOND BEACH, FL 32176 US

Title: MGRM ( ) Delete  
Name: KURTZ, MARYSUE A  
Address: 2480 OCEAN SHORE BLVD., UNIT 117  
City-St-Zip: ORMOND BEACH, FL 32176 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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: FREDERICK A. KURTZ      MGRM      01/06/2004

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date