
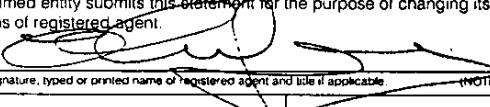
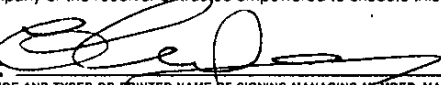


# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Feb 16, 2006 8:00 am**  
**Secretary of State**

02-16-2006 90140 020 \*\*\*\*50.00

<b>DOCUMENT # L03000017294</b> 1. Entity Name <b>BRIGHTON BAY VILLAGE I, LLC</b>					
Principal Place of Business <b>2101 WEST PLATT STREET, SUITE 200 TAMPA, FL 33606</b>			Mailing Address <b>2101 WEST PLATT STREET, SUITE 200 TAMPA, FL 33606</b>		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number <b>75-3117676</b>			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			<b>\$5.00</b> Additional Fee Required		
6. Name and Address of Current Registered Agent <b>KOEHLER, KEITH E KOEHLER &amp; COMPANY, P.A. 502 NORTH ARMENIA AVE TAMPA, FL 33609</b>			7. Name and Address of New Registered Agent Name <b>ARAM GULUBIAN</b> Street Address (P.O. Box Number is Not Acceptable) <b>2101 W. PLATT STREET, STE 200</b> City <b>TAMPA</b> FL Zip Code <b>33606</b>		
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  <b>ARAM GULUBIAN</b> 2/8/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> DATE					
<b>Filing Fee is \$50.00 Due by May 1, 2006</b>			Make check payable to <b>Florida Department of State</b>		
<b>9. MANAGING MEMBERS/MANAGERS</b>			<b>10. ADDITIONS/CHANGES</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR LUM, JOHN 2101 WEST PLATT STREET, SUITE 200 TAMPA, FL 33606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MANAGING MEMBER LIST PROPERTIES, LLC 2101 W PLATT ST., STE 200 TAMPA FLORIDA 33606</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GULUBIAN, ARAM 2101 W PLATT ST, # 200 TAMPA, FL 33606	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 			<b>ARAM GULUBIAN, MGR MGR LIST PROPERTIES, LLC MGR MGR</b> 2/8/06 (813) 258-5478		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>			<small>Date Daytime Phone #</small>		