2005 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT Mar 21, 2005 08:00 AM **DOCUMENT # L03000026573 Secretary of State** 1. Entity Name **BRUNER REAL ESTATE LLC** Principal Place of Business Mailing Address 875 SE MONTEREY COMMONS BLVD. 875 SE MONTEREY COMMONS BLVD. STUART, FL 34996 STUART, FL 34996 03162005 No Chg-LLC CR2E083 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-0105671 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FOX, M. LANNING DO NOT WRITE 1100 SOUTH FEDERAL HIGHWAY STUART, FL 34994 IN THIS SPACE 3. 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 reinstating) DATE Filing Fee is \$50.00 Due by May 1, 2005 9, MANAGING MEMBERS/MANAGERS MGRM TATLE BRUNER, JAMES K NAME STREET ADDRESS 875 SE MONTEREY COMMONS BLVD. CITY-ST-ZIP STUART, FL 34996 U00000270842 TITLE 03/21/05-80025-003 50.00 NAME BRUNER, JANICE L 875 SE MONTEREY COMMONS BLVD. STREET ADDRESS CITY-ST-ZIP STUART, FL 34996 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP 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 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 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 regelver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

manageme moulder SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

TITLE NAME STREET ADDRESS CITY-ST-ZIP

3.17.05