## 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT # L04000015692

1. Entity Name
BREE DEVELOPMENT, LLC



Principal Place of Business

4287 ESCONDITO CIRCLE, PRESTANCIA SARASOTA, FL 34238 Mailing Address

1700 DUNCAN AVE ALLISON PARK, PA 15101

## FILED Apr 17, 2006 8:00 am Secretary of State

03-30-2006 90195 012 \*\*\*\*50.00

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02072006No Chg-LLC

CR2E083 (11/05)

4. FEI Number 90-0142628

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

6. Name and Address of Current Registered Agent

DEJESUS, ALEXANDER 4287 ESCONDITO CIRCLE, PRESTANCIA SARASOTA, FL 34238 DO NOT WRITE IN THIS SPACE

8.	The above named entity submits this statement for the purpose of	of changi	ng its registered office or registered agent, or both, in the State	of Florid	la. I am familiar with, t	and accept
	the obligations of registered agent.	•		_	i i	
	Alexand 1211	~~	2	102	1.7	
SIC	INATURE 70023007	MD		1	700	
_,,,	Signature, typed or printed name of registered agent and title # applicable	, -	(NOTE: Registered Agent signature required when reinstating)	7	DATE	

Filing Fee is \$50.00 Due by May 1, 2008

1 3.	MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY+ST-ZIP	MGRM DEJESUS, ALEXANDER 4287 ESCONDITO CIRCLE,PRESTANCIA SARASOTA, FL 34238		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM DEJESUS, JANINE 4287 ESCONDITO CIRCLE,PRESTANCIA SARASOTA, FL 34238		
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TITLE NAME STREET ADDRESS CITY-SI-ZIP	·		

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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 outrusted appropriate the execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED HAME OF BINCHO MANAGING MEMBER, OR ALTI

NING MANAGING MEMBER, OR ALTHORIZED REPRESENTATIVE

Date

Daytime Phone #