2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 09, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000016191

1. Entity Name
BRAUSER - SWAYMAN BUILDING II, LLC

Principal Place of Business	Mailing Address
5022 N.W. 102ND DRIVE CORAL SPRINGS, FL 33076 US	P.O. BOX 9754 CORAL SPRINGS, FL 33075 US

02052006 No Chg-LLC CR2E083 (11/05)

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4. FEI Number
06-1720726
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

SWAYMAN, ROBERT
5022 N.W. 102ND DRIVE
CORAL SPRINGS, FL 33076

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $50.00
Due by May 1, 2006

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	SWAYMAN, ROBERT
STREET ADDRESS	5022 N.W. 102ND DRIVE
CITY-ST-ZIP	CORAL SPRINGS, FL 33076
TITLE	MGR
NAME	BRAUSER, MICHAEL
STREET ADDRESS	3164 N.E. 31ST AVE
CITY-ST-ZIP	LIGHTHOUSE PT, FL 33064
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
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NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-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 or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Robert Swayman 2/6/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #