2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT

DOCUMENT # L04000028733

1. Entity Name
BRIELLA TOWNHOMES, LLC

Principal Place of Business	Mailing Address
825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071 US	825 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071 US

DO NOT WRITE IN THIS SPACE

01222007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number 20-1010536	Applied For
	Not Applicable

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

6. Name and Address of Current Registered Agent

LEOPOLD, KORN & LEOPOLD, P.A.
20801 BISCAYNE BLVD.
SUITE 501
AVENTURA, FL 33180

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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_____

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, 2007

9.	MANAGING MEMBERS/MANAGERS
TITLE	MGR
NAME	CENTERLINE HOMES INC
STREET ADDRESS	825 CORAL RIDGE DR
CITY-ST-ZIP	POMPANO BEACH, FL 33071
TITLE	MGR
NAME	MORTON, MICHAEL
STREET ADDRESS	15340 JOG RD STE 200
CITY-ST-ZIP	DELRAY BEACH, FL 33446
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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_____   3|19|07   954-344-8040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #