

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 12, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000036037	
1. Entity Name BIRDSONG ENTERPRISES, LLC	

Principal Place of Business 1105 MOLAKI DRIVE MERRITT ISLAND, FL 32953	Mailing Address PO BOX 541086 MERRITT ISLAND, FL 32954-1086
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04102006 No Chg-LLC

CRZE083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number NOT APPLICABLE	☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BRATER, PATRICIA L 1105 MOLAKI DRIVE MERRITT ISLAND, FL 32953

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when resigning) **DATE** _____

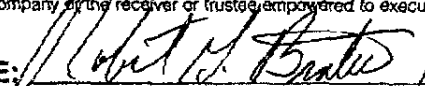
**Filing Fee is \$50.00
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRATER, ROBERT G PO BOX 541086 MERRITT ISLAND, FL 329541086
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRATER, PATRICIA L PO BOX 541086 MERRITT ISLAND, FL 329541086
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04/26/06-80104-016 50.00

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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 G. BRATER** **4/10/2006 321) 452-1504**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE DATE Office Phone #