

**2007 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # L04000055056**

**1. Entity Name**  
**BRINDLE INVESTMENTS, LLC**



**Principal Place of Business**  
**104 N. CHURCH STREET**  
**KISSIMMEE, FL 34741**

**Mailing Address**  
**104 N. CHURCH STREET**  
**KISSIMMEE, FL 34741**



01172007No Chg-LLC

CR2E083 (11/05)

**DO NOT WRITE IN THIS SPACE**

**4. FEI Number**  
**41-2171115**

**Applied For**  
**Not Applicable**

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

**6. Name and Address of Current Registered Agent**

**MARK, BRIAN M**  
**104 N. CHURCH STREET**  
**KISSIMMEE, FL 34741**

**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**

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**

|                       |                             |
|-----------------------|-----------------------------|
| <b>TITLE</b>          | <b>MGR</b>                  |
| <b>NAME</b>           | <b>MARK, BRIAN M</b>        |
| <b>STREET ADDRESS</b> | <b>104 N. CHURCH STREET</b> |
| <b>CITY-ST-ZIP</b>    | <b>KISSIMMEE, FL 34741</b>  |
| <b>TITLE</b>          |                             |
| <b>NAME</b>           |                             |
| <b>STREET ADDRESS</b> |                             |
| <b>CITY-ST-ZIP</b>    |                             |
| <b>TITLE</b>          |                             |
| <b>NAME</b>           |                             |
| <b>STREET ADDRESS</b> |                             |
| <b>CITY-ST-ZIP</b>    |                             |
| <b>TITLE</b>          |                             |
| <b>NAME</b>           |                             |
| <b>STREET ADDRESS</b> |                             |
| <b>CITY-ST-ZIP</b>    |                             |
| <b>TITLE</b>          |                             |
| <b>NAME</b>           |                             |
| <b>STREET ADDRESS</b> |                             |
| <b>CITY-ST-ZIP</b>    |                             |

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01/22/07-80071-021 50.00

**DO NOT WRITE  
IN THIS SPACE**

**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:**

*Brian M. Mark as atty.*

*1/17/07*

*407-9323933*

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

Date

Daytime Phone #