

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000070601

Entity Name: BRETT HOLDINGS II LLC

FILED
Apr 30, 2007
Secretary of State

Current Principal Place of Business:

2645 CITRUS KEY LIME CT
NAPLES, FL 34120 US

New Principal Place of Business:

2243 GROVE DR.
NAPLES, FL 34120 US

Current Mailing Address:

2645 CITRUS KEY LIME COURT
NAPLES, FL 34120 US

New Mailing Address:

2243 GROVE DR.
NAPLES, FL 34120 US

FEI Number: 20-2022187

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRETT, DANIEL J
2645 CITRUS KEY LIME COURT
NAPLES, FL, FL 34120 US

Name and Address of New Registered Agent:

BRETT, DANIEL J
2243 GROVE DR.
NAPLES, FL, FL 34120 US

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.

SIGNATURE: DANIEL J. BRETT

04/30/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: BRETT, DANIEL J
Address: 2645 CITRUS KEY LIME COURT
City-St-Zip: NAPLES, FL 34120

Title: MGRM () Delete
Name: BRETT, DEBRA L
Address: 2645 CITRUS KEY LIME COURT
City-St-Zip: NAPLES, FL 34120

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: BRETT, DANIEL J
Address: 2243 GROVE DR.
City-St-Zip: NAPLES, FL 34120

Title: MGRM (X) Change () Addition
Name: BRETT, DEBRA L
Address: 2243 GROVE DR.
City-St-Zip: NAPLES, FL 34120

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DANIEL J. BRETT

MGMR

04/30/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date