

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED

2007 APR 11 PM 11:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # L05000020440

1. Entity Name  
BROOKSTONE ESTATES, LLC



Principal Place of Business  
300 EAST HIGHWAY 50  
CLERMONT, FL 34711

Mailing Address  
300 EAST HIGHWAY 50  
CLERMONT, FL 34711



03302007 No Chg-LLC

CR2E083 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number  
20-2522645

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional  
Fee Required

6. Name and Address of Current Registered Agent

VALLERY, MARK G  
300 EAST HIGHWAY 50  
CLERMONT, FL 34711

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
MGRM  
VALLERY FLORIDA HOLDING COMPANY  
300 EAST HIGHWAY 50  
CLERMONT, FL 34711

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

500102626785  
05/16/07--01002--027 \*\*50.00

000000895982  
04/16/07 00064-011 150.00

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

4/16/07 352-394-0614  
Date Daytime Phone #