2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 02, 2007
Secretary of State

DOCUMENT# L05000020523

Entity Name: BR-2, LLC

Current Principal Place of Business:

276 SPRINGSIDE RD.
LONGWOOD, FL 32779

New Principal Place of Business:

Current Mailing Address:

276 SPRINGSIDE RD.
LONGWOOD, FL 32779

New Mailing Address:

FEI Number: 20-2848217 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

BROTMAN, LESTER M
276 SPRINGSIDE RD.
LONGWOOD, FL 32779 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM	( ) Delete
Name:	BROTMAN, LESTER M	
Address:	443 RIVER ISLE CT.	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	MGR	( ) Delete
Name:	WELLS, CRAIG	
Address:	1111 SHADOWBROOK TRAIL	
City-St-Zip:	WINTER SPRINGS, FL 32708	
Title:	MGR	( ) Delete
Name:	COSENTINO, STEVEN	
Address:	351 WEST 20TH ST.	
City-St-Zip:	NEW YORK, NY 10011	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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: LESTER M. BROTMAN MGRM 05/02/2007

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