2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

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FILED
Jun 06, 2006 8:00 am
Secretary of State

05-01-2006 90077 008 ****50.00

DOCUMENT # L05000034072

1. Entity Name
BRANTLEY HEIGHTS, L.L.C.

Principal Place of Business
5150 BELFORT ROAD, BUILDING 100
JACKSONVILLE, FL 32256

Mailing Address
5150 BELFORT ROAD, BUILDING 100
JACKSONVILLE, FL 32256

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip | Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip | Country

03102008 Chg-LLC CR2E083 (11/05)

4. FEI Number 20-2706017 | Applied For | Not Applicable

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

6. Name and Address of Current Registered Agent
SCHNEIDER, MICHAEL N
5150 BELFORT ROAD, BUILDING 100
JACKSONVILLE, FL 32256

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City | FL | Zip Code

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 resigning) DATE

Filing Fee is $50.00
Due by May 1, 2006

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME Jamie Adler
STREET ADDRESS 933 Beville Rd. Ste 103-F
CITY-ST-ZIP South Daytona, FL 32119
☐ Delete

TITLE
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STREET ADDRESS
CITY-ST-ZIP
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10. ADDITIONS/CHANGES

TITLE
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CITY-ST-ZIP
☐ Change ☐ Addition

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STREET ADDRESS
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CITY-ST-ZIP
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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: _____ 3/20/06 904 296 0100
SIGNATURE AND TYPED OR PRINTED NAME OF MGRMG MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #