

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000062478

FILED  
Feb 15, 2006  
Secretary of State

**Entity Name:** BROWNSTONE CLASSIC HOMES OF ST. LUCIE, LLC

**Current Principal Place of Business:**

3207 BARTON ROAD  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

3207 BARTON ROAD  
POMPANO BEACH, FL 33062

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

BROWN, SUSAN  
3207 BARTON ROAD  
POMPANO BEACH, FL 33062      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: BROWN, SUSAN  
Address: 3207 BARTON ROAD  
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR      ( ) Delete  
Name: STONE, DAVID  
Address: 3207 BARTON ROAD  
City-St-Zip: POMPANO BEACH, FL 33062

Title: MGR      ( ) Delete  
Name: OGRIN, MEL  
Address: 10791 AVENIDA SANTA ANA  
City-St-Zip: BOCA RATON, FL 33498

Title: MGR      ( ) Delete  
Name: OGRIN, BARRY  
Address: 10605 MENDOCINO LANE  
City-St-Zip: BOCA RATON, FL 33428

**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:

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

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN BROWN

MGRM

02/15/2006

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