

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000063794

FILED  
May 19, 2006  
Secretary of State

Entity Name: BROTHERS IN SPIRIT LLC

**Current Principal Place of Business:**

290 POMPANO DRIVE  
MELBOURNE BEACH, FL 32951

**New Principal Place of Business:**

**Current Mailing Address:**

290 POMPANO DRIVE  
MELBOURNE BEACH, FL 32951

**New Mailing Address:**

FEI Number: 20-3078673      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)  
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:**

BUSINESS FILINGS INCORPORATED  
1203 GOVERNORS SQUARE BLVD., SUITE 101  
TALLAHASSEE, FL 323012960 US

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

MILLS, THOMAS L  
290 POMPANO DR  
MELBOURNE BEACH, FL 32951      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: THOMAS L MILLS

05/19/2006

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: MILLS, THOMAS  
Address: 290 POMPANO DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: MILLS, THOMAS L  
Address: 290 POMPANO DRIVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

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: THOMAS L MILLS

MGR

05/19/2006

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