

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089556

FILED
Mar 26, 2006
Secretary of State

Entity Name: MIDDLEBROOK INVESTMENT, LLC

Current Principal Place of Business:

34016 VALENCIA DRIVE
LEESBURG, FL 34788

New Principal Place of Business:

1058 CEASARS COURT
MOUNT DORA, FL 32757

Current Mailing Address:

34016 VALENCIA DRIVE
LEESBURG, FL 34788

New Mailing Address:

1058 CEASARS COURT
MOUNT DORA, FL 32757

FEI Number: 20-3310136

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEBRAYEL, NEHME
34016 VALENCIA DRIVE
LEESBURG, FL 34788 US

Name and Address of New Registered Agent:

GEBRAYEL, NEHME
1058 CEASARS COURT
MOUNT DORA, FL 32757 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: NEHME GEBRAYEL

03/26/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GEBRAYEL, NEHME
Address: 34016 VALENCIA DRIVE
City-St-Zip: LEESBURG, FL 34788

Title: MGR () Delete
Name: GABRIEL, MILAD
Address: 34016 VALENCIA DRIVE
City-St-Zip: LEESBURG, FL 34788

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GEBRAYEL, NEHME
Address: 1058 CEASARS COURT
City-St-Zip: MOUNT DORA, FL 32757

Title: MGR (X) Change () Addition
Name: GABRIEL, MILAD
Address: 1058 CEASARS COURT
City-St-Zip: MOUNT DORA, FL 32757

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: NEHME GEBRAYEL

MGRM

03/26/2006

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