

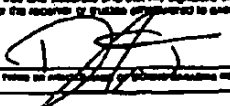
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L05000098002

**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L05000098002			
1. Entity Name BOURSON BROTHERS, LLC			
Principal Place of Business 125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418		Mailing Address 125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418	
2. Principal Place of Business		3. Mailing Address	
State, Apt. #, etc.		State, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. Name and Address of Current Registered Agent FREDERIC T. DEMON, JR., P.A. 5600 PGA BLVD., SUITE 211 PALM BEACH GARDENS, FL 33418		5. Name and Address of Prior Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL Zip Code _____	
6. The above named entity certifies that statements 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 of agent or person named in registered office and who is authorized to receive service of process on behalf of the entity		DATE _____/_____/_____	
Filing Fee to \$50.00 Due by May 1, 2008		Make check payable to Florida Department of State	
MANAGING MEMBER/MANAGERS		ADDITIONS/CHANGES	
1. Name, Title, and Address of Managing Member/Manager BOURSON BROTHERS, LLC (MGRM) 125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418		2. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove	
3. Name, Title, and Address of Adding/Changing Member/Manager BOURSON BROTHERS, LLC (MGRM) 125 SAINT EDWARDS PLACE PALM BEACH GARDENS, FL 33418		4. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove	
5. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove		6. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove	
7. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove		8. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove	
9. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove		10. Name, Title, and Address of Adding/Changing Member/Manager ☐ Change ☐ Add/Remove	
11. I hereby certify that the information supplied with this filing does not violate the provisions contained in Chapter 118, 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: 		DATE: 3/26/06	

M. Cantor SEP 25 2006