

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000098968

Entity Name: BREVARD HOUSING, LLC

FILED
Apr 17, 2006
Secretary of State

Current Principal Place of Business:

3517 SWAN LAKE DRIVE
TITUSVILLE, FL 32796

New Principal Place of Business:

3406 SKIMMER LANE
TITUSVILLE, FL 32796

Current Mailing Address:

3517 SWAN LAKE DRIVE
TITUSVILLE, FL 32796

New Mailing Address:

3406 SKIMMER LANE
TITUSVILLE, FL 32796

FEI Number: 74-3158911

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

OKONSKI, PAUL F
3517 SWAN LAKE DRIVE
TITUSVILLE, FL, FL 32796 US

Name and Address of New Registered Agent:

OKONSKI, PAUL F
3406 SKIMMER LANE
TITUSVILLE, FL 32796 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:

04/17/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OKONSKI, PAUL F
Address: 3517 SWAN LAKE DRIVE
City-St-Zip: TITUSVILLE, FL 32796

Title: MGRM () Delete
Name: STRAKA, CHRISTOPHER J
Address: 3517 SWAN LAKE DRIVE
City-St-Zip: TITUSVILLE, FL 32796

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: OKONSKI, PAUL F
Address: 3406 SKIMMER LANE
City-St-Zip: TITUSVILLE, FL 32796

Title: MGRM (X) Change () Addition
Name: STRAKA, CHRISTOPHER J
Address: 3406 SKIMMER LANE
City-St-Zip: TITUSVILLE, FL 32796

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: PAUL F. OKONSKI

MGMR

04/17/2006

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