ANNUAL REPORT (AR) - DUE BY MAY 1, 2008

2008 LIMITED LIABILITY COMPANY DOCUMENT # L07000011066 1. Entity Name 961 BRANTLEY STREET, LLC



FILED Feb 05, 2008 8:00 am Secretary of State 02-05-2008 90028 005 ***138.75

Principal Prac	e of Business	3	Mailing Address								
961 BRANTLEY STREET THE VILLAGES FL 32162 US			961 BRANTLEY STREET THE VILLAGES FL 32162 US								
2. Principal F	Place of Busin	ess - No P.O. Box #	3. Mailing Address					E1 (1911 EE112 B1119 S)	1884 NJ 1881		
Suite, Apt.	, #, etc.		Suite, Apt. #, etc.		15	t MOORE	CR2E08	3 (10/07)			
City & State			City & State			4. FEL Num:	344845		⊢	pplied For ot Applicable	
Zip		Country	Zip	Country			e of Status Desired		\$5.00 Add		
	6. Name	and Address of Curren	t Registered Agent	egistered Agent			7. Name and Address of New Registered Agent				
			И	Name							
YOUNGKIN; ELLIS Q 961 BRANTLEY STREET THE VILLAGES FL 32162					Street Address (P.O. Box Number is Not Acceptable)						
			Ci	City FL Zip Code							
8. 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. I am familiar with, and accept the obligations of registered agent.											
SIGNATURE Signature, typed or control name of registered agent and title if applybable (NOTE, Registered as						med and a comment of	_	f: 4 fm			
Signature, typed or strong have of registered agent and titled applicable (NOTE, Registerior equal signature required when renertaling) DATE											
After May 1, 2008, Fee Will Be \$538.75 Make Check Payable to Florida Department of State											
9. MANAGING MEMBE			ERS/MANAGERS	10.	· · · · · · · · · · · · · · · · · · ·		ADDITIONS	S/CHANGE	S		
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TITLE			Delete	TITLE					Change	Addition	
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11. hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

STREET ADDRESS

CITY-ST-ZIP

ANALING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

STREET ADDRESS

CITY-ST-ZIP