

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

08 APR 23 AM 8:59

DOCUMENT # L07000021250					
1. Entity Name BROOKHAVEN/VIRGINIA, LLC					
Principal Place of Business 3333 S. ORANGE AVENUE STE 200 ORLANDO, FL 32806-8500			Mailing Address 3333 S. ORANGE AVENUE STE 200 ORLANDO, FL 32806-8500		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 20-8510889	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CARTER, DARYL M 3333 S. ORANGE AVENUE STE 200 ORLANDO, FL 32806-8500				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75				Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/> MGRM CARTER-CROSSMAN INVESTMENTS, 3333 S. ORANGE AVE, #200 LTD ORLANDO, FL 32806		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete <input type="checkbox"/> Change <input type="checkbox"/> Addition <input type="checkbox"/> 900125501429 04/24/08--01008--003 **2165.00	
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 of the register or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: _____			Date 02/12/08 Daytime Phone # 407 422 3144		