2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State
04-21-2008 90318 028 ***138.75

DOCUMENT # L07000088723

1. Entity Name
BROCK-SR405/BARNA, LLC

Principal Place of Business	Mailing Address
1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401	1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401

3000 7077

02282008 Chg-LLC CR2E083 (12/06)

2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
4650 Donald Ross Rd		4650 Donald Ross Rd.	
Suite, Apt. #, etc. Suite 200		Suite, Apt. #, etc. Suite 200	
City & State Palm Beach Gardens FL		City & State Palm Beach Gardens FL	
Zip 33418	Country	Zip 33418	Country

4. FEI Number 86-1317851 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
BROCK, PETER 1551 FORUM PLACE, SUITE 100 WEST PALM BEACH, FL 33401	Name Brock, Peter Street Address (P.O. Box Number is Not Acceptable) 4650 Donald Ross Rd Suite 200 City Palm Beach Gardens FL Zip Code 33418

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 ______________________ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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	MGRM BROCK, PETER ~~1551 FORUM PLACE, SUITE 100~~ ~~WEST PALM BEACH, FL 33401~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 4650 Donald Ross Rd. Suite 200 Palm Beach Gardens, FL 33418
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM BROCK, ANDREW ~~1551 FORUM PLACE, SUITE 100~~ ~~WEST PALM BEACH, FL 33401~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition 4650 Donald Ross Rd. Suite 200 Palm Beach Gardens, FL 33418
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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 or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: ______________________
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #