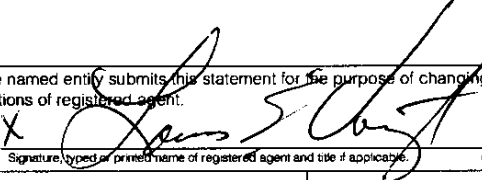
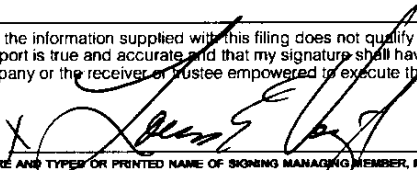


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 18, 2008 8:00 am
Secretary of State

04-18-2008 90172 001 *5,966.25

DOCUMENT # L07000121876 1. Entity Name BRM HERITAGE PARK CREST, LLC																					
Principal Place of Business 707 MENDHAM BLVD., SUITE 201 ORLANDO, FL 32825			Mailing Address 707 MENDHAM BLVD., SUITE 201 ORLANDO, FL 32825																		
2. Principal Place of Business - No P.O. Box # 495 N. Keller Rd.		3. Mailing Address 495 N. Keller Rd.		30004270  02292008 Chg-LLC CR2E083 (12/06) 4. FEI Number ☒ Applied For ☐ Not Applicable 5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required																	
Suite, Apt. #, etc. Ste. 301		Suite, Apt. #, etc. Ste. 301																			
City & State Maitland, FL		City & State Maitland, FL																			
Zip 32751	Country USA	Zip 32751	Country USA																		
6. Name and Address of Current Registered Agent VOGT, LOUIS E 707 MENDHAM BLVD., SUITE 201 ORLANDO, FL 32825				7. Name and Address of New Registered Agent Name Louis E. Vogt Street Address (P.O. Box Number is Not Acceptable) 495 N. Keller Rd., Ste. 301 City Maitland FL Zip Code 32751																	
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  Louis E. Vogt 4-15-08 Signature typed or printed name of registered agent and title if applicable. (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																	
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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:  Louis E. Vogt				4-15-08 407-478-1290																	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE				Date Daytime Phone #																	