

2003 LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # M0200000417 1. Entity Name BROWNSTONE MANAGEMENT, LLC	
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Principal Place of Business 9656 PENDANUS WAY BOYNTON BEACH, FL 33436	Mailing Address 9656 PENDANUS WAY BOYNTON BEACH, FL 33436
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2. Principal Place of Business 905 SW Third Av Suite, Apt. #, etc.	3. Mailing Address PO Box 243198 Suite, Apt. #, etc.
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CHECK HERE IF MAKING CHANGES

City & State Boynton Beach, Fl	City & State Boynton Beach, Fl	4. FEI Number 65-1043529	Applied For <input type="checkbox"/> Not Applicable
Zip 33426	Country USA	Zip 33424	Country USA
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required			

6. Name and Address of Current Registered Agent MERKAL, ROBERT T 9656 PANDANUS WAY BOYNTON BEACH, FL 33436	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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's signature required when reinstating)

FILE NOW!!! FEE IS \$50.00
 Make Check Payable to Florida Department of State
 Due By May 1, 2003

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MERKAL, ROBERT T 9656 PANDANUS WAY BOYNTON BEACH, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MERKAL, ROBERT T. 905 SW Third Av Boynton Beach, Fl 33426
	<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Robert T. Merkmal

SIGNATURE: Robert T. Merkmal, Manager 4/14/2003 561 737 8328

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Day and Phone #

0325092 (10/02)