


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 14, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # M03000000733</b> 1. Entity Name BROOKWOOD CORAL GABLES CO., LLC		
Principal Place of Business 50 DUNHAM RD. BEVERLY, MA 01915	Mailing Address 50 DUNHAM RD. BEVERLY, MA 01915	
<b>DO NOT WRITE IN THIS SPACE</b>		
6. Name and Address of Current Registered Agent  TANEN, JEFFREY S ESQ. ONE BISCAYNE TOWER, SUITE 3250 MIAMI, FL 33131		<b>DO NOT WRITE IN THIS SPACE</b>
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)</small> DATE _____		
Filing Fee is \$50.00 Due by May 1, 2006		
9. MANAGING MEMBERS/MANAGERS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM TRKLA, THOMAS N 50 DUNHAM RD BEVERLY, MA 01915	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BROWN, THOMAS W 50 DUNHAM RD BEVERLY, MA 01915	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MAEL, JOEL 1350 AVENUE OF THE AMERICAS STE 1910 NEW YORK, NY 10019	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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 60B, Florida Statutes.		
SIGNATURE: <u>Eric P. Lill</u>		4/13/06 978-927-8300
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE		Date Daytime Phone #



04102006No Chg-LLC

CR2E083 (11/05)

4. FEI Number  
04-3453568

Applied For  
Not Applicable

5. Certificate of Status Desired



\$5.00 Additional  
Fee Required

**DO NOT WRITE  
IN THIS SPACE**