

**2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**  
**May 02, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # M03000002949**  
 1. Entity Name  
**BROOKWOOD BISCAYNE TOWER CO., LLC**



Principal Place of Business 50 DUNHAM ROAD BEVERLY, MA 01915	Mailing Address 50 DUNHAM ROAD BEVERLY, MA 01915
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**DO NOT WRITE IN THIS SPACE**



04212008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 51-0479019	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent

CORPORATION SERVICE COMPANY  
 1201 HAYS STREET  
 TALLAHASSEE, FL 32301-2525

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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$138.75**  
**After May 1, 2008 Fee will be \$538.75**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR TRKLA, THOMAS N 50 DUNHAM ROAD BEVERLY, MA 01915
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR BROWN, THOMAS W 50 DUNHAM ROAD BEVERLY, MA 01915
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGR MAEL, JOEL A 1350 AVE 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	

U00000943974  
 05/29/08-80080-023 138.75

**DO NOT WRITE IN THIS SPACE**

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: Everd. Lh Date: 4/24/08 Daytime Phone #: 978-927-8300

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE