2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 16, 2007
Secretary of State

DOCUMENT# M03000003036

Entity Name: BRMW MANAGEMENT, L.L.C.

Current Principal Place of Business:

12651 BRIAR FOREST DR., SUITE 205
HOUSTON, TX 77077

New Principal Place of Business:

Current Mailing Address:

12651 BRIAR FOREST DR., SUITE 205
HOUSTON, TX 77077

New Mailing Address:

FEI Number: 76-0663448 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title:	MGR	( ) Delete
Name:	REED, JEFFREY K	
Address:	12651 BRIAR FOREST DR., SUITE 205	
City-St-Zip:	HOUSTON, TX 77077	
Title:	MGR	( ) Delete
Name:	MURRAY, JAMES R III	
Address:	12651 BRIAR FOREST DR., SUITE 205	
City-St-Zip:	HOUSTON, TX 77077	
Title:	MGR	( ) Delete
Name:	REED-BEAUREGARD, PATRICIA A	
Address:	12651 BRIAR FOREST DR., SUITE 205	
City-St-Zip:	HOUSTON, TX 77077	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: JEFFREY K REED MGR 01/16/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date