2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # M05000002578

1. Entity Name
BRUNSON ENTERPRISES, LLC



FILED Apr 03, 2006 8:00 am Secretary of State 04-03-2006 90065 020 ****50.00

DIGITORY ENTERN MODE, DEG									
Principal Place of Business 3930 OAKS CLUBHOUSE DR. #207 POMPANO BEACH, FL 33069		Mailing Address 3930 OAKS CLUBHOUSE DR. #207 POMPANO BEACH, FL 33069							
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		03292006	Chg-LLC	CR2E083	3 (11/05)		
City & State		City & State			4. FEI Numbe	~ 16/ C C	983	ļ	plied For t Applicable
Zip	Country	Zip Coun		ту	1.	of Status Desired	□ \$!	5.00 Add	litional
	6. Name and Address of Current R	egistered Agent	' 		7. Name and	Address of New I			
				Name 0//a					
3930 OAK	N, MICHAEL BROOKS S CLUBHOUSE DR. #207 D BEACH, FL 33069	Street Address (P.O			P.O. Box Number	r is Not Acceptabl	e)		
7 01411 71111	5 DEX (511, 1 E 00000		İ						•
	•			City			FL	Zip Code	9
8. The above the obligat	named enity submits this statement for ions of registered agent.	the purpose of changing its	registered	d office or register	ed agent, or bot	h, in the State of Fl	orida. I am far	niliar with,	and accept
SIGNATURE	Signature, typed or printed name of registered agent ar	d title if applicable. (NOT	E: Registered	Agent signature required	when reinstating)		DATE		
	lling Fee is \$50.00 ue by May 1, 2006						te check pay a Departmen		•
9.	MANAGING MEMBER	S/MANAGERS	10.		J	ADDITIONS	/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRUNSON, MICHAEL BROOKS 3930 OAKS CLUBHOUSE DR. #2 POMPANO BEACH, FL 33069	☐ Delete	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP				Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE	T ADORESS			Γ	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME	T ADDRESS			[_ Change	Addition
THILE NAME STREET ADDRESS CITY-ST-ZIP		☐ Deicte	TITLE NAME STREET CITY-S	T ADDRESS ST-ZIP			С	_ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		C.] Delete	TITLE NAME	T ADDRESS			[Change	Addition
NAME STREET ADDRESS CATY-ST-ZIP	certify that the information supplied with t	□ Delete	CATY-S	i	in Chapter 119	Florida Statutes 1 f		Change	Addition

indicated on this report is true and accurate and that my signature shall have the same legal effect as it made under oath; that I all limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.