## **2008 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**DOCUMENT # M07000001748** 

1. Entity Name

BRITTANY OF MICHIGAN, LLC July 18 Comment of the State of

25899 WEST 12 MILE ROAD, STE 260

**FILED** Mar 03, 2008 08:00 A Secretary of State

Principal Place of Business SOUTHFIELD, MI 48034

25899 WEST 12 MILE ROAD, STE 260 SOUTHFIELD, MI 48034

的公路站。

3" " 3"

DO NOT WRITE IN THIS SPACE

01312008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 38-2309057

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Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

Signature, typed or printed name of registered agent and title if applicable.

MATHES, BARRY V SR 5010 NE WALDO ROAD GAINESVILLE, FL 32609

## DO NOT WRITE IN THIS SPACE

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	d accept
	the obligations of registered agent.		
~	and the control of th		

(NOTE: Registered Agent signature required when reinstating)

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

U00000845350 03/13/08-80036-007 138.75

DATE

9.	MANAGING MEMBERS/MANAGERS
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RISSMAN, ROBERT 25899 WEST 12 MILE ROAD, STE 260 SOUTHFIELD, MI 48034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM RISSMAN, BURTON 25899 WEST 12 MILE ROAD, STE 260 SOUTHFIELD, MI 48034
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-S1-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-7/P	

DO NOT WRITE IN THIS SPACE

11. It hereby certify that the information supplied with this bling does not qualify for the exemptions contained in Chapter 119. Florida Statutes. If 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 AND TYPE

Davime Phone #