

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M07000004139

FILED  
Jan 09, 2009  
Secretary of State

Entity Name: BREI-GIRVIN ROAD HOLDINGS, LLC

**Current Principal Place of Business:**

495 HEARDS FERRY ROAD, NW  
ATLANTA, GA 30328

**New Principal Place of Business:**

100 GIRVIN ROAD  
JACKSONVILLE, FL 32225

**Current Mailing Address:**

495 HEARDS FERRY ROAD, NW  
ATLANTA, GA 30328

**New Mailing Address:**

FEI Number: 26-0467306

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:**

LO PRESTI, BECKY S AGENT  
100 GIRVIN ROAD  
JACKSONVILLE, FL 32225 US

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: BECKY S. LOPRESTI

01/09/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: CFO ( ) Delete  
Name: IRLBECK, KEVIN  
Address: 495 HEARDS FERRY ROAD, NW  
City-St-Zip: ATLANTA, GA 30328

Title: CEO ( ) Delete  
Name: WEINER, BRUCE  
Address: 495 HEARDS FERRY ROAD, NW  
City-St-Zip: ATLANTA, GA 30328

Title: P ( ) Delete  
Name: SCHMUSCHKOWITZ, HOWARD  
Address: 495 HEARDS FERRY ROAD, NW  
City-St-Zip: ATLANTA, GA 30328

**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 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: KEVIN IRLBECK

CFO

01/09/2009

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