## 2003 LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)** DOCUMENT # L01000010332 04-14-2003 90751 026 \*\*\*\*50.00 1. Entity Name BRADY PROPERTIES, L.L.C.

## **FILED** Apr 14, 2003 8:00 am Secretary of State

		Mailing Address 6705 S.W. WOODBINE WAY PALM CITY FL 34990					
2. Principal Place of Business		3. Mailing Address	3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES		
City & State		City & State		4. FEI Num	4. FEI Number 65-1117012 Applied For Not Applicable		
Zip	Country	Zip	Country		te of Status Desired	\$5.00 Add	ditional d
	6. Name and Address of Current	Registered Agent	Name	7. Name ar	nd Address of New Registere	d Agent	
6705	dy, robert 5 S.W. Woodbine Way M City FL 34990		Street Address (P.O. B		ber is Not Acceptable)		
			City		F	Zip Cod	e
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							
FILE NOW!!! FEE IS \$50.00  Make Check Payable to Florida Department of State  Due By May 1, 2003							
9.	MANAGING MEMBEI	RS/MANAGERS	10.		ADDITIONS/CHANGI	ES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM BRADY, ROBERT 6705 S.W. WOODBINE WAY PALM CITY FL 34990	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		Delete	NAME STREET ADDRESS CITY-ST-ZIP	* ***	* * * * * * * * * * * * * * * * * * * *	☐ Change	, Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	11TLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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.