


**2004 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # L99000009094**  
1. Entity Name  
PEBBLE CREEK ENTERPRISES, LLC



Principal Place of Business  
19651 BRUCE B. DOWNS BLVD.  
TAMPA, FL 33647

Mailing Address  
8911 REGENTS PARK DR., #550  
TAMPA, FL 33647



01182004No Chg-LLC CR2E083 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2915758	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent

BRUSCINO, HENRY JR.  
8911 REGENT'S PARK DRIVE, SUITE 550  
TAMPA, FL 33647

**DO NOT WRITE  
IN THIS SPACE**

3. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent Signature required when reinstating)

**Filing Fee is \$50.00  
Due by May 1, 2004**

8. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM BRUSCINO, HENRY JR. 8911 REGENTS PARK DRIVE, #500 TAMPA, FL 33647
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000000011527  
01/23/04-80041-005 50.00

**DO NOT WRITE  
IN THIS SPACE**

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.

**SIGNATURE:** *Henry Bruscinio Jr.* HENRY BRUSCINO JR. 1/19/04 813-973-4155  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Day to Phone #