2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L01000020801

BROUNLEY TECHNICAL SERVICES, L.L.C.

FILED Apr 28, 2004 08:00 AM Secretary of State

Principal Place of Business

5304 COMMONWEALTH ROAD PALMETTO, FL 34221

Mailing Address

5304 COMMONWEALTH ROAD PALMETTO, FL 34221



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

4. FEI Number	Applied For	
30 <u>-001528</u> 0	Not Applicable	
	4	

\$5.00 Additional 5. Certificate of Status Desired Fee Required

BROUNLEY, RICHARD R 5304 COMMONWEALTH ROAD PALMETTO, FL 34221

DO NOT WRITE IN THIS SPACE

5. The above the obligat	named entity submits this statement for the purpose of cha tions of registered agent.	inging its registered office or registered agent, or both, in the	State of Florida. I am familiar with, and accept
SIGNATURE.			
	Signature, typed or printed name of registered agent and title if applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
F D	iling Fee is \$50.00 ue by May 1, 2004	_	
9.	MANAGING MEMBERS/MANAGERS		
TTLE	MGRM		
NAME	BROUNLEY, RICHARD R		
STREET ADDRESS	5304 COMMONWEALTH ROAD		
CITY-ST-ZIP	PALMETTO, FL 34221	د س	U00000135096 28/04-80046-005 50.00 =
TILE		U47,	28/04-80046-005 50.00 ~
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
MLE			
NAME			
STREET ADDRESS		l no vo	T 16/1517F
CITY-ST-ZIP		טא טע	T WRITE
ITUE		IN THE	S SPACE
NAME		114 11218	S SPACE
STREET ADDRESS			
CITY-ST-ZIP			
ITLE			
NAME			
STREET ADDRESS			
CITY-ST-ZIP			
ITLE			
VAME	** 2	1	_
STREET ADDRESS			

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE