

# 2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000021837

**FILED**  
**Apr 06, 2007**  
**Secretary of State**

**Entity Name:** 12415 73RD COURT, L.L.C.

**Current Principal Place of Business:**

15371 ROOSEVELT BLVD, SUITE 107  
CLEARWATER, FL 33760

**New Principal Place of Business:**

**Current Mailing Address:**

15371 ROOSEVELT BLVD, SUITE 107  
CLEARWATER, FL 33760

**New Mailing Address:**

FEI Number: 26-7708387

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GASSMAN, ALAN S  
1245 COURT STREET, SUITE 102  
CLEARWATER, FL 33756 US

**Name and Address of New Registered Agent:**

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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: BAILEY, SALLY L  
Address: 15371 ROOSEVELT BLVD, SUITE 107  
City-St-Zip: CLEARWATER, FL 33760

Title: MGR ( ) Delete  
Name: MILEY, JENNIFER N  
Address: 15371 ROOSEVELT BLVD, SUITE 107  
City-St-Zip: CLEARWATER, FL 33760

**ADDITIONS/CHANGES:**

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 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: JENNIFER N MILEY

MGR

04/06/2007

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