


**FILED<sup>3</sup>**  
**Jul 18, 2005 08:00 AM**  
 Secretary of State

**2005 LIMITED LIABILITY COMPANY ANNUAL REPORT**

**DOCUMENT # L00000005613**

1. Entity Name  
 4523 30TH STREET W, BRADENTON, FL, L.C.



Principal Place of Business 4523 30TH ST. WEST BRADENTON, FL 34207	Mailing Address 640 KINGSTON CT. APOLLO BEACH, FL 33572
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**DO NOT WRITE IN THIS SPACE**



06302005No Chg-LLC CR2E083 (10/03)

4. FEI Number 65-1009915	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$5.00 Additional Fee Required	

6. Name and Address of Current Registered Agent

HARVEY, DAVID E  
 640 KINGSTON CT  
 APOLLO BEACH, FL 33572

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when installing) \_\_\_\_\_ DATE \_\_\_\_\_

**Filing Fee is \$50.00  
 Due by September 7, 2005**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR SMITH, STUART H 830 RIVER DRIVE GARFIELD, NJ 07026
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SMITH, MARIANNE E 640 KINGSTON CT APOLLO BEACH, FL 33572
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 07/18/05-80014-024 55.00

**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(5)(f), 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: Marianne Smith 7/12/05  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #