

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000002916

FILED  
Apr 17, 2008  
Secretary of State

Entity Name: BRYANT & COMPANY, CPA'S, LLC

**Current Principal Place of Business:**

4250 S. FLORIDA AV  
SUITE 2  
LAKELAND, FL 33813

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 508  
LAKELAND, FL 338020508

**New Mailing Address:**

FEI Number: 59-3703279

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VOGELBACHER, PIERRE M  
2560 GULF TO BAY BLVD., SUITE 300  
CLEARWATER, FL 33765 US

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

BRYANT, THOMAS J  
4250 S FLORIDA AVENUE  
SUITE 2  
LAKELAND, FL 33813 US

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: THOMAS J BRYANT

04/17/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: PREINER, LYNN  
Address: 4250 S. FLORIDA AVE., STE. 2  
City-St-Zip: LAKELAND, FL 33813

Title: MGRM ( ) Delete  
Name: BRYANT, THOMAS I  
Address: 4250 S. FLORIDA AVE STE 2  
City-St-Zip: LAKELAND, FL 33813

**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 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: LYNN L PREINER

MFRM

04/17/2008

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