

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000008487

FILED
Apr 16, 2008
Secretary of State

Entity Name: BRADFORD TERRACE, LLC

Current Principal Place of Business:

808 S. COLLEY
STARKE, FL 32091

New Principal Place of Business:

Current Mailing Address:

6865 N. LINCOLN AVENUE
LINCOLNWOOD, IL 60712

New Mailing Address:

FEI Number: 36-4447151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GINSPARG, NORMAN J
12221 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161 US

Name and Address of New Registered Agent:

INCORP SERVICES, INC
17888 67TH COURT NORTH
LOXAHATCHEE, FL 33470 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: SARAH GIBSON ON BEHALF OF INCORP SERVICES

04/16/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: ESFORMES, MORRIS I
Address: 6865 N. LINCOLN AVENUE
City-St-Zip: LINCOLNWOOD, IL 60712

Title: MGRM () Delete
Name: ROBERTS, SIDNEY
Address: 120 CHIPOLA AVE
City-St-Zip: DELAND, FL 32720

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: MORRIS ESFORMES

MGRM

04/16/2008

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