

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000049755

Entity Name: BRADLEY P. COTTER, L.L.C.

FILED
May 06, 2006
Secretary of State

Current Principal Place of Business:

2715 MARY SUE STREET
LARGO, FL 33774

New Principal Place of Business:

Current Mailing Address:

2715 MARY SUE STREET
LARGO, FL 33774

New Mailing Address:

FEI Number: 13-3502468 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

COTTER, BRADLEY P
2715 MARY SUE STREET
LARGO, FL 33774 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: P () Delete
Name: COTTER, BRADLEY P
Address: 2715 MARY SUE STREET
City-St-Zip: LARGO, FL 33774

Title: VP () Delete
Name: VANDEA REYDEA, WILLIAM R
Address: 360 GULF BLVD APT W
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: T () Delete
Name: SAMPSON, DAVID C
Address: 12378 RUBY STREET
City-St-Zip: LARGO, FL 33773

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: BRADLEY P COTTER

P

05/06/2006

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