


**2006 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 25, 2006 08:00 AM
Secretary of State

DOCUMENT # L04000020977
1. Entity Name
BRUCE RANDOLPH AKERS, LLC



Principal Place of Business
**7823 SUNDOWN DR.
ST. PETERSBURG, FL 33709**

Mailing Address
**7823 SUNDOWN DR.
ST. PETERSBURG, FL 33709**

DO NOT WRITE IN THIS SPACE



01172006 No Chg-LLC CR2E083 (11/05)

4. FEI Number
57-1203362 Applied For Not Applicable

5. Certificate of Status Desired **\$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent
**BRUCE RANDOLPH AKERS
7823 SUNDOWN DR.
ST. PETERSBURG, FL 33709**

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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 registering) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2006**

CK#4776

8. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BRUCE RANDOLPH AKERS 7823 SUNDOWN DR. ST. PETERSBURG, FL 33709
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02/02/06-80057-017 50.00

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Bruce Randolph Akers* *1/21/2006* *(727) 541-588*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #