


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 15, 2008 08:00 AM
Secretary of State


DOCUMENT # L04000028515

1. Entity Name
 727 BRUCE, LLC



Principal Place of Business 7105 PELICAN ISLAND DRIVE TAMPA, FL 33634	Mailing Address 7105 PELICAN ISLAND DRIVE TAMPA, FL 33634
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DO NOT WRITE IN THIS SPACE



01312008No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-1356742	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

HINES, JAMES P
 315 S. HYDE PARK AVENUE
 TAMPA, FL 33606

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

U00000829111
 02/26/08-80027-007 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM HIRSCHFELD, JOSEPH J 7105 PELICAN ISLAND DRIVE TAMPA, FL 33634
TITLE NAME STREET ADDRESS CITY- ST- ZIP	MGRM HIRSCHFELD, MARILYN C 7105 PELICAN ISLAND DRIVE TAMPA, FL 33634
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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: *Joseph J. Hirschfeld* **Joseph J. Hirschfeld** 2/12/08 FD-881-2083

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