


**2007 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Mar 05, 2007 08:00 A
Secretary of State

DOCUMENT # L04000032072 1. Entity Name BRU-LYN MARKETING, LLC	
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Principal Place of Business 1256 PINE SISKIN DRIVE PUNTA GORDA, FL 33950 US	Mailing Address 1256 PINE SISKIN DRIVE PUNTA GORDA, FL 33950 US
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DO NOT WRITE IN THIS SPACE



03012007 No Chg-LLC

CR2E083 (11/05)

4. FEI Number 30-0248178	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

**MATTHEWS, LYNNE R
1256 PINE SISKIN DRIVE
PUNTA GORDA, FL 33950**

**DO NOT WRITE
IN THIS SPACE**

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 reappointing) DATE _____

**Filing Fee is \$50.00
Due by May 1, 2007**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM MATTHEWS, LYNNE R 1256 PINE SISKIN DRIVE PUNTA GORDA, FL 33950
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03/14/07-80011-005 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: *Angie R. Matthews* 3/1/07 941-505-5747
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #