

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jan 16, 2008 8:00 am
Secretary of State

01-16-2008 90052 045 ***138.75

DOCUMENT # L0400005262

1. Entity Name

BRICKYARD PROPERTIES, L.L.C.



Principal Place of Business

530 US HIGHWAY 41 BYP S
VENICE, FL 34285

Mailing Address

530 US HIGHWAY 41 BYP S
VENICE, FL 34285 STE. 108

00001708



01092008 No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number

20-1431584

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

ZIOBER, JAMES M
530 US HIGHWAY 41 BYP S
VENICE, FL 34285 STE. 108

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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

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

9. MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ZIOBER, JAMES M
STREET ADDRESS	530 US HIGHWAY 41 BYP S
CITY-ST-ZIP	VENICE, FL 34285 STE. 108
TITLE	MGR
NAME	ZIOBER, GERALDINE
STREET ADDRESS	530 US HIGHWAY 41 BYB S
CITY-ST-ZIP	VENICE, FL 34285 STE. 108
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: James M Zieber JAMES M ZIOBER

1-10-08

941-468-1645

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #