

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000042348

Entity Name: PSP OF BREVARD, LLC

**FILED**  
**Jan 06, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 410686  
MELBOURNE, FL 32941

**New Mailing Address:**

FEI Number: 76-0791230

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

BOLOGNA-GARAGOZLO, PATRICIA  
3903 POST RIDGE ROAD  
MELBOURNE, FL 32935 US

**Name and Address of New Registered Agent:**

BOLOGNA-GARAGOZLO, PATRICIA  
3903 POST RIDGE TRAIL  
MELBOURNE, FL 32935 US

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:

01/06/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BOLOGNA, SALVATORE E  
Address: P.O. BOX 410686  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM  
Name: BOLOGNA-GARAGOZLO, PATRICIA  
Address: P.O. BOX 410686  
City-St-Zip: MELBOURNE, FL 32941

Title: MGRM  
Name: BOLOGNA, PAUL J  
Address: P.O. BOX 410686  
City-St-Zip: MELBOURNE, FL 32941

I hereby 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: PATRICIA E. BOLOGNA-GARAGOZLO

MGR

01/06/2010

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