

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

**Jun 13, 2008 8:00 am
Secretary of State**

05-07-2008 90016 002 ***138.75

DOCUMENT # L06000001520 1. Entity Name BRAY & GILLESPIE XXXV, LLC	
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Principal Place of Business 600 N. ATLANTIC AVE DAYTONA BEACH, FL 32118	Mailing Address 600 N. ATLANTIC AVE DAYTONA BEACH, FL 32118
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30009301



01142008 No Chg-LLC CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number 20-4600818	Applied For Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent BRAY, CHARLES A 600 N. ATLANTIC AVE DAYTONA BEACH, FL 32118
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**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 registering) DATE _____

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

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR BRAY, CHARLES A 600 N. ATLANTIC AVE. DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Bray & Gillespie Acquisitions, LLC 600 N. ATLANTIC AVE DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR Gillespie, Joseph G 600 N. Atlantic Ave Daytona Beach FL 32118
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: Charles A Bray 1/22/08 386-267-1603
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #