

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

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

05-07-2008 90016 021 ***138.75

DOCUMENT # L06000089720	
1. Entity Name BRAY & GILLESPIE LVI, LLC	

Principal Place of Business 600 NORTH ATLANTIC AVENUE DAYTONA BEACH, FL 32118	Mailing Address 600 NORTH ATLANTIC AVENUE DAYTONA BEACH, FL 32118
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DO NOT WRITE IN THIS SPACE

30009319



01142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-5537133	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 NORTH ATLANTIC AVENUE
DAYTONA BEACH, FL 32118

**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 _____

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 <i>Delete</i> ☒
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GILLESPIE, JOSEPH G 600 N. ATLANTIC AVE DAYTONA BEACH, FL 32118 <i>Delete</i> ☒
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bray, Gillespie VII, LLC 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 #