

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # L06000098492

1. Entity Name
BRADLEY & ROBINSON, P.L.



Principal Place of Business
1215 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FL 33301

Mailing Address
1215 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FL 33301



04042008No Chg-LLC

CR2E083 (12/07)

DO NOT WRITE IN THIS SPACE

4. FEI Number
43-2069534

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRADLEY, JOHN F
1215 EAST BROWARD BOULEVARD
FORT LAUDERDALE, FL 33301

**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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

4/4/08

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

000000890437
04/22/08-80094-024 138.75

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM
NAME	JOHN F. BRADLEY, P.A.
STREET ADDRESS	1215 EAST BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301
TITLE	MGRM
NAME	GEOFFREY KING ROBINSON, P.A.
STREET ADDRESS	1215 EAST BROWARD BLVD
CITY-ST-ZIP	FORT LAUDERDALE, FL 33301
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:

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

4/4/08

Date

9545236160

Daytime Phone #