

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000120230

FILED  
Feb 21, 2008  
Secretary of State

Entity Name: BRIDGE STREET PARKING, LLC

**Current Principal Place of Business:**

11 CADIZ STREET  
SAINT AUGUSTINE, FL 32084 US

**New Principal Place of Business:**

**Current Mailing Address:**

11 CADIZ STREET  
SAINT AUGUSTINE, FL 32084 US

**New Mailing Address:**

FEI Number: 26-1497918

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RUDE-HARRIS, JACQUELYN  
11 CADIZ STREET  
SAINT AUGUSTINE, FL 32084 US

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

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:

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: CONSTANT, MARK  
Address: 340 CHARLOTTE STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MGRM ( ) Delete  
Name: CONSTANT, KERRIANNE  
Address: 340 CHARLOTTE STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MGR ( ) Delete  
Name: SONIA, JEFFREY  
Address: 21 AVILES STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MGR ( ) Delete  
Name: GRAUBARD, ROBERT M TRUSTEE  
Address: 33 WATER STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MGR ( ) Delete  
Name: RUDE, MARC  
Address: 11 CADIZ STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

Title: MGRM ( ) Delete  
Name: RUDE-HARRIS, JACQUELYN  
Address: 11 CADIZ STREET  
City-St-Zip: SAINT AUGUSTINE, FL 32084 US

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: JACQUELYN HARRIS-RUDE

MGRM

02/21/2008

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