

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000077753

Entity Name: LARRY BRAGE LLC

**FILED**  
**Apr 12, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4827 MELTON AVE  
APT #101  
TAMPA, FL 33614

**New Principal Place of Business:**

4901 N. ARMENIA AVE.  
TAMPA, FL 33603

**Current Mailing Address:**

4827 MELTON AVE  
APT #101  
TAMPA, FL 33614

**New Mailing Address:**

4827 MELTON AVE.  
APT 101  
TAMPA, FL 33614

FEI Number:

FEI Number Applied For ( )

FEI Number Not Applicable (X)

Certificate of Status Desired (X)

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

BRAGE, LARRY  
4827 MELTON AVE  
APT #101  
TAMPA, FL 33614 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  
Name: BRAGE, LARRY  
Address: 4827 MELTON AVE  
City-St-Zip: TAMPA, FL 33614

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: LARRY BRAGE

MGR

04/12/2010

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