


**2006 LIMITED LIABILITY COMPANY  
ANNUAL REPORT**

**FILED**  
**Apr 13, 2006 8:00 am**  
**Secretary of State**

04-13-2006 90039 035 \*\*\*\*50.00

DOCUMENT # M01000001853 1. Entity Name BRAY & GILLESPIE LLC V	
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Principal Place of Business 600 NORTH ATLANTIC AVE DAYOTNA BEACH, FL 32118	Mailing Address 600 NORTH ATLANTIC AVE DAYOTNA BEACH, FL 32118
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**DO NOT WRITE IN THIS SPACE**



02022006No Chg-LLC CR2E083 (11/05)

4. FEI Number 59-3686617	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required

6. Name and Address of Current Registered Agent  BRAY, CHARLES A 600 NORTH 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 reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$50.00  
Due by May 1, 2006**

9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAY & GILLESPIE V MANAGEMENT, INC. PO BOX 265400 DAYTONA BEACH, FL 32126
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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

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_