

**2008 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED

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

05-07-2008 90017 050 ***138.75

DOCUMENT # M06000000853

1. Entity Name
BRAY & GILLESPIE LLC XLIII



Principal Place of Business
**600 NORTH ATLANTIC AVENUE
DAYTONA BEACH, FL 32118**

Mailing Address
**600 NORTH ATLANTIC AVENUE
DAYTONA BEACH, FL 32118**

30009321



DO NOT WRITE IN THIS SPACE

01142008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 20-4280807	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

**BRAY, CHARLES
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 renewing) 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 NORTH ATLANTIC AVENUE DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Bray: Gillespie Acquisitions, LLC 600 N. Atlantic Ave Daytona Beach, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR Gillespie, Joseph G. 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*

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

1/21/08

Date

386-267-1603

Daytime Phone