## 2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # M98000000869

BRIDGESTREET FINANCIAL CONSULTANTS, LLC



04-30-2004 90081 022 \*\*\*\*50.00

Apr 30, 2004 8:00 am Secretary of State

**FILED** 

Principal Place of Business

401-B YELVINGTON AVE. CLEARWATER, FL 33755 Mailing Address

401-B YELVINGTON AVE. CLEARWATER, FL 33755 24061271



02162004 No Chg-LLC

CR2E083 (10/03)

4. FEI Number 77-0455236

Applied For Not Applicable

5. Certificate of Status Desired

\$5.00 Additional

Fee Required

6. Name and Address of Current Registered Agent

DRUMMOND, TEMPLE HESQ **401 YELVINGTON AVE** CLEARWATER, FL 33755

## DO NOT WRITE IN THIS SPACE

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<b>9.</b> The above the obligation	enamed entity submits this statement for the purpose of chations of registered agent.	anging its registered office or registered agent, or both, in the State of	of Florida. I am familiar with, and accept
31,	<b>.</b>		
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	AVYE B	
4.	Signature, typed or printed harne or registered agent and the r applicable.	(NOTE: Registered Agent signature required when reinstating)	DATE
	iling Fee is \$50.00		
D	ue by May 1, 2004		
9.	MANAGING MEMBERS/MANAGERS		
TITLE-	MGRM		
NAME	BRADHAM, ČAROLYN		
STREET ADDRESS	401-B YELVINGTON AVE.		
CITY-ST-ZIP	CLEARWATER, FL 33755		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

STREET ADDRESS CITY-ST-ZIP

Daytime Phone #