

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000042348

**Entity Name:** PSP OF BREVARD, LLC

**Current Principal Place of Business:**

3903 POSTRIDGE TRAIL  
MELBOURNE, FL 32934

**Current Mailing Address:**

P.O. BOX 410686  
MELBOURNE, FL 32941

**FEI Number:** 76-0791230

**Certificate of Status Desired:** No

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

BOLOGNA-GARAGOZLO, PATRICIA  
3903 POST RIDGE TRAIL  
MELBOURNE, FL 32935 US

*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

**Authorized Person(s) Detail :**

Title MGRM  
Name BOLOGNA, SALVATORE E  
Address P.O. BOX 410686  
City-State-Zip: MELBOURNE FL 32941

Title MGRM  
Name BOLOGNA-GARAGOZLO, PATRICIA  
Address P.O. BOX 410686  
City-State-Zip: MELBOURNE FL 32941

Title MGRM  
Name BOLOGNA, PAUL J  
Address P.O. BOX 410686  
City-State-Zip: MELBOURNE FL 32941

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** PATRICIA E. BOLOGNA-GARAGOZLO

MGM

01/02/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date