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: TRACEY BRUCH

I

Electronic Signature of Signing Authorized Person(s) Detail

# Name and Address of Current Registered Agent:

BRUCH, TRACEY A. 3034 HOMESTEAD OAKS DRIVE CLEARWATER, FL 33759 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	: TRACEY BRUCH			03/28/2016	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	MGR	Title	MGRM		
Name	BRUCH, TRACEY	Name	BRUCH, BRIAN		
Address	3034 HOMESTEAD OAKS DRIVE	Address	3034 HOMESTEAD OAKS DRIVE		
City-State-Zip:	CLEARWATER FL 33759	City-State-Zip:	CLEARWATER FL 33759		

3034 HOMESTEAD OAKS DRIVE

DOCUMENT# L05000070757

CLEARWATER, FL 33759

### **Current Mailing Address:**

3034 HOMESTEAD OAKS DRIVE CLEARWATER, FL 33759

### FEI Number: NOT APPLICABLE

**Current Principal Place of Business:** 

### Entity Name: BRUCH APPRAISALS & CONSULTING, LLC

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## Secretary of State CC5724858976

FILED Mar 28, 2016

Certificate of Status Desired: No

MANAGER

Date