

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000001181

**Entity Name:** THE BRIAR TEAM, LLC

**Current Principal Place of Business:**

4570 ORANGE BLVD  
SANFORD, FL 32771

**Current Mailing Address:**

4570 ORANGE BLVD  
SANFORD, FL 32771

**FEI Number:** 26-3985471

**Certificate of Status Desired:** No

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

RIVERS, NOY  
4570 ORANGE BLVD  
SANFORD, FL 32771 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 GOOD, MICHAEL J  
Address 1885 W LAKE MARY BLVD.  
City-State-Zip: LAKE MARY FL 32746

Title MGRM  
Name RIVERS, SRAVUT N  
Address 3600 THOMPSON RD  
City-State-Zip: LAKE MARY FL 32746

Title MGRM  
Name HARRELL, ROBERT E  
Address 108 ORANGE DR.  
City-State-Zip: SANFORD FL 32773

*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:** SRAVUT N RIVERS

**MANAGING MEMBER**

**03/18/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date