

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000135752

Entity Name: BRUSU LLC

Current Principal Place of Business:

159 ADOBE CASA CT.
TAVERNIER, FL 33070

Current Mailing Address:

159 ADOBE CASA CT.
TAVERNIER, FL 33070

FEI Number: 45-1334829

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOWLER, BRUCE G
159 ADOBE CASA CT.
TAVERNIER, FL 33070 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	Title	CO MANAGER
Name	BRUCE, FOWLER G	Name	SUSANNE, SMITH C
Address	159 ADOBE CASA CT.	Address	159 ADOBE CASA CT.
City-State-Zip:	TAVERNIER FL 33070	City-State-Zip:	TAVERNIER FL 33070

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: BRUCE G FOWLER

MRGM

04/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date