

**2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000151149

**Entity Name:** THE BRIX PROJECT, LLC

**Current Principal Place of Business:**

305 S. WASHINGTON AVE.  
TITUSVILLE, FL 32796

**Current Mailing Address:**

305 S. WASHINGTON AVE.  
TITUSVILLE, FL 32796 US

**FEI Number:** 47-1954352

**Certificate of Status Desired:** No

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

SCOTT, BRYAN L  
305 S. WASHINGTON AVE.  
TITUSVILLE, FL 32796 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 MGR  
Name SCOTT, BRYAN L  
Address 320 KNOX MCRAE DR  
City-State-Zip: TITUSVILLE FL 32780

Title MGR  
Name RAIKE, RONALD M  
Address PO BOX 1464  
City-State-Zip: TITUSVILLE FL 32781

Title MGR  
Name SCOTT, DONNA C  
Address 320 KNOX MCRAE DR  
City-State-Zip: TITUSVILLE FL 32780

Title MGR  
Name RAIKE, KATHERINE B  
Address PO BOX 1464  
City-State-Zip: TITUSVILLE FL 32781

*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:** KATHERINE B RAIKE

MGR

04/28/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date