2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2009
Secretary of State

DOCUMENT# 231022

Entity Name: BRANDON DEVELOPERS, INC.

Current Principal Place of Business:

4417 KEYSVILLE ROAD
DURANT, FL 33530 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 936
DURANT, FL 33530 US

New Mailing Address:

FEI Number: 59-1002081 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PERDUE, H.K. R
4415 KEYSVILLE ROAD
DURANT, FL 33530 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: PERDUE, H K
Address: 4415 KEYSVILLE ROAD
City-St-Zip: DURANT, FL

Title: STRS ( ) Delete
Name: PERDUE, MICHELLE
Address: 201 MITCHELL ST
City-St-Zip: BAYSIDE, TX 78340

Title: RS ( ) Delete
Name: PERDUE, MICHELLE
Address: P.O. BOX 11-201 MITCHELL ST.
City-St-Zip: BAYSIDE, TX 78340

Title: V ( ) Delete
Name: PERDUE, DOUGLAS H.
Address: 8725 PITT RD.
City-St-Zip: PLANT CITY, FL 33567

Title: ARS ( ) Delete
Name: PERDUE, SHERI
Address: 8725 PITT RD
City-St-Zip: PLANT CITY, FL 33567

Title: AST ( ) Delete
Name: PERDUE, MARJORIE
Address: 4415 KEYSVILLE RD
City-St-Zip: DURANT, FL 33530

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: H.K. PERDUE PD 04/20/2009

Electronic Signature of Signing Officer or Director Date