2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 18, 2005 08:00 AM Secretary of State

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DOCUMENT # F0300002311 1. Entity Name BRADLEY-MORRIS, INC.							of State
1825 BARRETT LAKES BLVD., SUITE 300 1		Mailing Address 1825 BARRETT LAKES BLVD., SUITE 300 KENNESAW, GA 30144		[E BBILL NSITS (18 BB E	KOL IFOOT FINION ALFONY
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_	A NOT WOITE			01042005	No Chg-P	CR2E034 (10/03)
L	OO NOT WRITE	IN THIS SPA	UE	4. FEI Number 58-1951	473		Applied For Not Applicable
			And the second s	5. Certificate of		□ \$8.	75 Additional Required
	6. Name and Address of Current R		Car Section States and Con-				
CLARK, G	iLENN			DO I	VOT W	DITE	and the second of the second o
9270 WEST MARLASUE STREET CRYSTAL RIVER, FL 34428					11-1 Market Units		- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
				IN I	HIS SF	ACE	
					-		
	named entity submits this statement for tions of registered agent.	the purpose of changing its register	ed office or register	ed agent, or both,	in the State of Flo	rida. 1 am fami	liar with, and accept
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signs				(when reinstaling)		DATE	-
=							
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Finance Trust Fund Contribution,				.00 May Be ed to Fees			
10.	OFFICERS AND D	IRECTORS	1				•
TITLE NAME	P BRADLEY, SHAUN		*	هر د د د د دست ۱۳۰۲ دود	ega (f. 2003) ga (f. 2003)	_	÷ 4
STREET ADDRESS CITY-ST-ZIP	3039 OLD MYSTIC TRAIL ACWORTH, GA 30102	- · ·		<u>العادة م</u> المراجع ال	Saran (1994) Marini and America La Cara (1994)		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MORRIS, SANDRA A 960 MOUNTAIN PARK CIRCLE KENNESAW, GA 30152	:		The state of the s	112192050 11219205	82946 80049-018	3 150.00
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STREET ADDRESS				· · · · · · · · · · · · · · · · · · ·	ى بىرى ئۇڭ دىتلاشلان ئىرى		
CITY-ST-7IP			. ** .	•	** * J 4450 = "		
CITY-ST-ZIP TITLE			- जानकास्य (स्ट प्रियम् स्थानका स्थान	الأولاد المستعدد الم المستعدد المستعدد الم	أناف موكرون		
TITLE NAME			न सामाध्यम् स्ट्राप्तकाषु स्ट्राप्तका	16.	أناف موكرون		· .
TITLE			गाम <u>ामस्य १६१ प्रिन्</u> शितस्य स्था संदर्भ	16.			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #