

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K57768

FILED  
Mar 21, 2008  
Secretary of State

Entity Name: PREMIER BRUSH, INC.

**Current Principal Place of Business:**

2500 MINNESOTA AVENUE  
LYNN HAVEN, FL 32444 US

**New Principal Place of Business:**

**Current Mailing Address:**

P. O. BOX 15695  
PANAMA CITY, FL 32406 US

**New Mailing Address:**

FEI Number: 59-2924594      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

STOPKA, ALBERT J III  
108 MOSLEY DRIVE  
LYNN HAVEN, FL 32444 US

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

STOPKA, BRIAN J SR  
2500 MINNESOTA AVE  
LYNN HAVEN, FL 32444 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: BRIAN J. STOPKA, SR.

03/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: STOPKA, ALBERT J JR.  
Address: 2500 MINNESOTA AVENUE  
City-St-Zip: LYNN HAVEN, FL

Title: V ( ) Delete  
Name: STOPKA, ALBERT J III  
Address: 108 MOSLEY DRIVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: V (X) Delete  
Name: STOPKA, BRIAN J SR  
Address: 2500 MINNESOTA AVE  
City-St-Zip: LYNN HAVEN, FL 32444

Title: SD (X) Delete  
Name: STOPKA, NANCY M  
Address: 2500 MINNESOTA AVE  
City-St-Zip: LYNN HAVEN, FL 32444

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: STOPKA, BRIAN J SR  
Address: 2500 MINNESOTA AVENUE  
City-St-Zip: LYNN HAVEN, FL 32444 US

Title: S (X) Change ( ) Addition  
Name: STOPKA, RHONDA H  
Address: 1008 KRISTANNA DR.  
City-St-Zip: PANAMA CITY, FL 32405 US

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: BRIAN J. STOPKA, SR.

PTD

03/21/2008

Electronic Signature of Signing Officer or Director

Date