


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2006 8:00 am
Secretary of State

04-11-2006 90120 012 ****61.25

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DOCUMENT # N10599					
1. Entity Name BRADEN CASTLE ASSOCIATION, INC.					
Principal Place of Business #1 OFFICE DRIVE BRADENTON, FL 34208 US			Mailing Address #1 OFFICE DRIVE BRADENTON, FL 34208 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-0184075	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HARRISON, THOMAS W 1206 MANATEE AVE. WEST BRADENTON, FL 34205				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BARTRUM, WILLIAM 7 BRANDEN CASTLE DR BRADENTON, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BORDERS, PATRICIA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4 Parkview Bradenton, FL. 34208		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD COOLIDGE, BRALEY 11 COLUMBIA ST BRADENTON, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Johnson, C. C. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 15 Seminole Dr. Bradenton, FL. 34208		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MATTERN, DORIS <input checked="" type="checkbox"/> Delete 1206 MANATEE AVE W BRADENTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Abrams, Jim <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 10 Oak St. Bradenton, FL. 34208		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRIFFITH, BRUCE <input type="checkbox"/> Delete 11 HIGH STREET BRADENTON, FL 34208	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REIGELSPERGER, WARREN <input checked="" type="checkbox"/> Delete 64 BRADEN CASTLE DR BRADENTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ZIMMERMAN, DON <input checked="" type="checkbox"/> Delete 33 BRADEN CASTLE DR BRADENTON, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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: <i>Candace Sue Neff</i> CANDACE W SUE NEFF, ASST. MGR 4-6-06 941-746-7700 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					