

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # P01000068609	
1. Entity Name BRUDER PROPERTIES GROUP, INCORPORATED	

Principal Place of Business 18930 ST. LAURENT DR. LUTZ, FL 33549-2807	Mailing Address 18930 ST. LAURENT DR. LUTZ, FL 33558
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DO NOT WRITE IN THIS SPACE



02222006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3729774	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

DICKENS, MRK S
9340 N. 56TH ST., SUITE 200-A
TAMPA, FL 33617

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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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when certifying)

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BRUDER, THOMAS B 18930 ST. LAURENT DR. LUTZ, FL 33558
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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 507, 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: T.B. Bruder Thomas B. Bruder 3/6/06 948-6004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone