

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 19, 2006 8:00 am
Secretary of State

01-19-2006 90066 001 ***150.00

DOCUMENT # P04000054588 1. Entity Name AB BRYAN PROPERTIES, INC.					
Principal Place of Business 6711 WINTERSET GARDENS RD WINTER HAVEN, FL 33884			Mailing Address 6711 WINTERSET GARDENS RD WINTER HAVEN, FL 33884		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BRYAN, IRENE C 6711 WINTERSET GARDENS RD WINTER HAVEN, FL 33884				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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	PD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYAN, JAMES R		NAME		
STREET ADDRESS	6711 WINTERSET GARDENS RD		STREET ADDRESS		
CITY - ST - ZIP	WINTER HAVEN, FL 33884		CITY - ST - ZIP		
TITLE	VD		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYAN, IRENE C		NAME		
STREET ADDRESS	6711 WINTERSET GARDENS RD		STREET ADDRESS		
CITY - ST - ZIP	WINTER HAVEN, FL 33884		CITY - ST - ZIP		
TITLE	T		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYAN, J. MICHAEL		NAME		
STREET ADDRESS	6711 WINTERSET GARDENS RD		STREET ADDRESS		
CITY - ST - ZIP	WINTER HAVEN, FL 33884		CITY - ST - ZIP		
TITLE	S		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYAN, C. SUZANNE		NAME		
STREET ADDRESS	6711 WINTERSET GARDENS RD		STREET ADDRESS		
CITY - ST - ZIP	WINTER HAVEN, FL 33884		CITY - ST - ZIP		
TITLE			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
TITLE			TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY - ST - ZIP			CITY - ST - ZIP		
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 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: <u>James R. Bryan</u> James R. BRYAN 1/16/06 863-295-1384					