FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name 177852

(1)

THE B	RADLEY COMPANY, INC	•				
Principal Place of	of Business	Mailing Address		•		# HOU OLDIA DIGIL OLDIL #10H DHAIL BLAIL BLAIL
1426 48TH COURT 1426 48TH COURT VERO BEACH FL 32966 VERO BEACH FL 329			66			
					3. Date Incorporated or Qualified 03/20/1954	3a. Date of Last Report 03/27/1995
 Principal Place 	pe of Business	2a. Mailing Address			4. FEI Number	Applied For
1 Suite Apt #	oto .	Suite, Apl. #, etc.			59-0725643	Not Applicable
Suite, Apt. #, etc.		27	7		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Crty & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 1	Country 25	Z _i p 29	Count	ry	8. This corporation has liability for in Florida Statutes Yes	
	9. Name and Address of Curre	ent Registered Agent	11		10. Name and Address of New Re	gistered Agent
			8	11 Name		<u>-</u>
BRADLEY, JOHN W 1426 48TH CT				2 Street Add	dress (P.Ö. Box Number is Not Acceptable)	
			Ľ	2 Street Add		
VERO B	EACH FL 32960		8	13		
			E	4 City		85 Zip Code
				1 - 7	ration submits this statement for the purp	FL T T
familiar with SIGNATURE s	i, and accept the obligations of, Sec Ignature, typed or printed name of registerod ago	otion 607.0505, Florida Statutes.	E: Flogistered A	gent signature require		DAIF
2.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	<u>-</u>
ITLE	PD PO	☐ DELETE	1. 1 TITLE			Change Addition
AME	BRADLEY, JOHN W		1 2 NAM			
TREET ADDRESS	1426 48TH CT. VERO BEACH FL		1	ET ADDRESS		
TLE	n	☐ DELETE	2 1 TITL	- ST - ZIP		Change Addition
AME	BRADLEY, JAMES		2 2 NAM			
TREET ADDRESS	1426 48TH CT.		2.3 STR6	ET ADDRESS		
TY-ST-ZIP	VERO BEACH FL		2 4 GITY	- ST - ZIP		
TLE	STD	☐ DELETE	3 1 TITL	E		☐ Change ☐ Addition
AME	BRADLEY, MAJORIE		3.2 NAM	E		
FREET ADDRESS	1426 48TH COURT		3.3 STR	EET ADDRESS	·	•
TY-ST-ZIP	VERO BEACH FL	ETT DELETE		-ST-Z:P		
TLE		☐ DELETE	4 1 TITL			Change Addition
AME			4 2 NAM			
REET ADDRESS				ET ADDRESS		
TY-ST-ZIP		DELETE	4 4 CITY 5 1 TITL			Change Addition
ME			5 2 NAM			□ o-range □ Mao/toti
REET ADDRESS				ET ADDRESS		
TY-ST-ZIP			5.4 City			
'LE		DELETE 617				Change Addition
AME			6.2 NAM	E		
TREET ADDRESS			6.3 STRE	ET ADDRESS		
ITY-ST-ZIP	\sim \sim \sim		6 4 CITY			
certify that to oath; that I a	he information indicated on this acc	hual report or supplemental arinu loration bruthe receiver of trustee	al report is t empowered	tue and accur:	for the exemption stated in Section 119.0 ate and that my signature shall have the s is report as required by Chapter 607, Flor	amo logal offect as if made under

SIGNATURE:

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR