## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

## FILED Mar 05, 2007 08:00 AM **DOCUMENT # 231022 Secretary of State** 1. Entity Name BRANDON DEVELOPERS, INC. Principal Place of Business Mailing Address PO BOX 936 DURANT FL 33530 4417 KEYSVILLE ROAD DURANT FL 33530 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E034 (10/06) City & State City & State 4. FEI Number Applied For 59-1002081 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent PERDUE, H.K. 4415 KEYSVILLE ROAD Street Address (P.O. Box Number is Not Acceptable) DURANT FL 33530 City 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 -Signature, typud or printed name of registered agent and title it applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 \$5.00 May Be 9. Election Campaign Financing After May 1, 2007 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE ☐ Delete TITLE Change ☐ Addition PERDUE, H K NAME NAME 4415 KEYSVILLE ROAD STREET ADDRESS STREET ADDRESS **DURANT FL** CITY-ST-ZIP CITY-ST-ZIP STRS Delete DILLE ☐ Change ☐ Addition PERDUE, MICHELLE NAME U00000655475 201 MITCHELL ST STREET ADDRESS STREET ADDRESS 03/13/07-80109-005 150.00 BAYSIDE TX 78340 CITY-ST-ZIP CLIY-S1-ZIP Delete ☐ Change ☐ Addition TIFLE THE PERDUE, MICHELLE NAME NAME STREET ADDRESS P.O. BOX 11-201 MITCHELL ST. STHEET ADDRESS BAYSIDE TX 78340 CITY-ST-ZIP CITY SI-ZIP ☐ Delete TITLE Change Addition PERDUE, DOUGLAS H. NAME NAME 8725 PITT RD. STREET ADDRESS STREET ADDRESS PLANT CITY FL 33567 CITY-SI-ZIP CITY-SI-ZIP Change Delete TITEE TITLE ☐ Addition PERDUE, SHERI NAME NAME 8725 PITT RD STREET ADDRESS STREET ADDRESS PLANT CITY FL 33567 CITY-ST-ZIP CITY-ST-ZIP HHI. ☐ Delele ШЦ. Change ☐ Addition PERDUE, MARJORIE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 eath; that I am an efficer 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.

NAME

STREET ADDRESS

CITY-ST-7IP

4415 KEYSVILLE RD

**DURANT FL 33530** 

NAME

STREET ADDRESS

CtTY+ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF