

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 289525

FILED
Jan 04, 2005
Secretary of State

Entity Name: ADAIR & BRADY, INCORPORATED

Current Principal Place of Business:

3461 FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

New Principal Place of Business:

Current Mailing Address:

3461 FAIRLANE FARMS ROAD
WELLINGTON, FL 33414

New Mailing Address:

FEI Number: 59-1086656

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROSE, ALBERT E.
3461 FAIRLANE FARMS RD
WEST PALM BEACH, FL 33414 US

Name and Address of New Registered Agent:

ROSE, ALBERT E.
3461 FAIRLANE FARMS RD
WELLINGTON, FL 33414 US

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.

SIGNATURE:

01/04/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROSE, ALBERT E.
Address: 15375 MEADOW WOOD DR
City-St-Zip: WELLINGTON, FL 33414

Title: VD () Delete
Name: O'LAUGHLIN, DOUGLAS,
Address: 14565 BELMONT TRACE
City-St-Zip: WELLINGTON, FL 33414

Title: ST () Delete
Name: ROSE, MARJORIE E.
Address: 15375 MEADOW WOOD DR
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD (X) Change () Addition
Name: O'LAUGHLIN, DOUGLAS,
Address: 14161 WELLINGTON TRACE
City-St-Zip: WELLINGTON, FL 33414

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ALBERT E. ROSE

PD

01/04/2005

Electronic Signature of Signing Officer or Director

Date