2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 321376

FILED Apr 29, 2005 8:00 am Secretary of State

1. Entity Name BRADLEY'S CHAIRS AND SOFAS, INCORPORATED					29-2005 90272 0	06 ***158.	75	
13055 STARKEY ROAD		Mailing Address 13055 STARKEY ROA	ND					
LARGO, FL	33773	LARGO, FL 33773			1 0 likul i (1 288 l ikul (17 10 0 11)		en elen ete	ANNOL A M
2. Principal Place of Business 3.		3. Mailing Address	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		Chg-P	CR2E034	(10/03)	
City & State		City & State	City & State		Der 04543			pplied F ot Applie
Zip	Country	Zip	Country	5. Certificate	e of Status Desired		3.75 Add Require	
	6. Name and Address of Curre	nt Registered Agent		7. Name an	d Address of New R	egistered Age	nt	
				Name				
	/, MICHAEL P ARKEY RD 51 - 33773		Street /	Address (P.O. Box Numb	per is Not Acceptable	9)		
,			City				Zip Cod	40
l			City			FL	Zip Cod	Ю
8. The above the obliga	e named entity submits this statementions of registered agent.	t for the purpose of changing i	its registered office of	or registered agent, or be	oth, in the State of Flo	orida. I am fam	iliar with,	and ac
SIGNATURE.	Signature, typed or printed name of registered as	gent and title if applicable. (NO	OTE: Registered Agent signs	ture required when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2005 Fee will be \$55	9. Election Camp Trust Fund Co	· · -	\$5.00 May Be Added to Fees				
10.	OFFICERS A	ND DIRECTORS	11.	ADDITIONS	CHANGES TO OFF	ICERS AND DI	RECTOR	S IN 11
TITLE	PD	☐ Delete	TITLE	<u> </u>		ńε	Change	☐ Ac
NAME	BRADLEY, PAUL A JR	_ *************************************	NAME	BRALLEY,	PAULA.Jr.		,	
STREET ADDRESS	13055 STARKEY RD		STREET ADDRESS	13055 57	Arkey KO			
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP	LAMO, F	1 33773			
TITLE	STD	☐ Detete	TITLE	P/T/D	- / -	, 0	Change	Ad
NAME	BRADLEY, MICHAEL P		NAME	BRADLEY	Michael P			
STREET ADDRESS	13055 STARKEY RD		STREET ADDRESS	13055 5	TANKEY KU			
CITY-ST-ZIP	LARGO, FL 33773		CITY-ST-ZIP		FL 33773			. 4
TITLE NAME	\	☐ Delete	TITLE	V/5	1. da S) Change	AC AC
STREET ADDRESS	†		NAME Street address	BRAUCEY	nolles Rh			
CITY-ST-ZIP	1		CITY-ST-ZIP	LACES F	LINDAS Arkey Ra L 33713			
TITLE		□ Delete	TITLE	10,7	2 123] Change	^
NAME			NAME			_) oncargo	۵.,
STREET ADDRESS			STREET ADDRESS	İ				
CITY-ST-ZIP			CITY-ST-ZIP					
TITLE		☐ Delete	TITLE			[Change	□ A
NAME			NAME	ļ				
STREET ADDRESS CITY-ST-ZIP		•	STREET ADORESS CITY-ST-ZIP					
TITLE			TITLE			r] Change	☐ Ac
NAME		UCICIB	NAME				1 ougule	
STREET ADDRESS			STREET ADDRESS					
CITY-ST-ZIP			CITY-ST-ZIP	1				

M. Sael P. Sindley Michael P. BRADLEY 04/27/05 (721)530-7061

^{12.} I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the informational 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 directly 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 changed, or on an attachment with an address, with all other like empowered.