## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999

BRADY PRODUCTS, INC.

1. Corporation Name

DOCUMENT # 388033



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

99 JAN 25 AM II: 39 SECH: CLATE TALLAHASSILL LORIDA



Principal Place	e of Business	Mailing Address					
P O BOX 5304		P O BOX 5304					
2151 LOGAN STREET		2151 LOGAN STREET			DO NOT WRITE IN THIS SPACE		
CLEARWATER F	L 34625	CLEARWATER FL 34618		ŀ	3. Date Incorporated or Qualified	THO SI AGE	
08					09/03/1971		
		Late Statuta Addition			4, FEI Number	Applied For	
F '	ace of Business	2a. Mailing Address		1	59-1376167	Not Applicable	
21		[26]		}	39-1370107	\$8.75 Additional	
Suite, Apt. #, etc		Suite, Apt. #, etc.			5. Gertificate of Status Desired [ ]	Fee Required	
22		Cily & State		.			
City & State		i i i			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
23		28   	Country				
Zıp	Country	i hear in the contract of the	Oddiniy		<ul> <li>8. This corporation owes the current year Personal Property Tax</li> </ul>	[]Yes [INo	
24	25 9. Name and Address of Curren	29 30	1	l	10. Name and Address of New Registe		
	g, Name and Address of Curren	t Kegistered Agent	81 1	Name	10. Hanne Bild Malaress of Med Hogists		
RRAI	DY, SHEILA A.						
2151 LOGAN STREET		82 Street Addr		Street Addres	s (P.O. Box Number is Not Acceptable)		
	ARWATER FL 34625		83				
OLL	AMAILI I E OTOEO		63				
			84 (	City		85 Zip Code	
						┍┖┤╎	
11. Pursuant	to the provisions of Sections 607.050	2 and 607.1508, Florida Statutes, th of Florida, Such change was author	he above-n rized by thi	iamed corpor e corporation	ation submits this statement for the purpos is board of it meters. Thereby accept the a	e of Changing its registered	
agent La	m familiar with, and accept the obliga	tion, of, Section 607.0505, Florida	Statutes.		's board of directors. Thereby accept the a		
SIGNATURE	SY Prov						
	Signature, types or printed manie of registere Lagor		_	justour te poted <b>v</b>			
12.		and the control of th	13.	:	ADDITIONS/CHANGES TO OFFICERS	S AND DIRECTORS IN 12	
TITLE	VSD	• • • • • • • • • • • • • • • • • • • •	11 TITLE	•	و والمنا المنا		
NAME	MORGAN, MARIANNE A		1.2 NAME	1	<b>- 4月月月月月月</b> 27年1月 - 10月1月日	389245 101015028	
STREET ADDRESS	655 APPALOOSA		13 STREFT AC	1	−₩ਫ਼ਖ਼ਖ਼ਫ਼ਫ਼ ****150.	nn ****150.00	
CITY-ST-ZIP	TARPON SPGS, FL 00000		14 C/TY+ST-7	le,	<b>市本市本上</b> □瓜。	[ Change [] Addition	
TITLE	CPT	• • • • • • • • • • • • • • • • • • • •	2.1 TITLE			[   Criange   E   Addition	
NAME	BRADY, SHEILA A.		2.2 NAME		c . $d$ $a$ $d$ $a$	_	
STREET ADDRESS	655 APPALOOSA RD		23 STREET AL	URI SS	5 11271199 49	l PM	
CITY-ST-ZIP	TARPON SPRINGS FL	and the second s	2 4 CHY-ST-2	/#P   [ €	7- 11-4 A L L L		
TITLE	, VD	[ ] DELETE	3 1 TI*LE	υ		Change [] Addition	
NAME	SAILOR, JIM	i i	3.2 NAME		mes_Sailor		
STREET ADDRESS	470 3RD STREET S 906	i	33STREELAI		33 Belcher Road		
City-St-ZiP	ST PTERSBURG FL 33701		34 CH1+-S1-Z	ne   C1	earwater, FL 33764		
TITLE	VD	<b>₩</b> DELETE .	4 1 717LE			[ ] Change	
NAME	BORLAND, CAMILLE	Į.	4 2 NAME				
STREET ADDRESS	1629 WINDSOR PL		4 3 STREET AZ	ORESS		ļ	
CITY-ST-ZIP	CLEARWATER FL		4.4 CITY-\$1-Z	ηė.   _		 	
TITLE	D	[   DELETE	5 1 10	D		Change [   Addition	
NAME	PHILLIPS, NORMAN J		5.2 NAME		rman J. Phillips		
STREET ADDRESS	10234 115 AVENUE NORTH	l	53STREELAD	ORESS 88	80 54th St.	į	
CITY-\$T-ZIP	LARGO FL 33773	Ł	54 CHY-51-7	<sup>™</sup>   Pi	nellas Park, FL 33782	) ·	
TITLE	<u></u>	[_  DELETE	61 Tili E	D	•	[ ] Change 🔀 Addition	
NAME	. 1 1	1	6.2 NAME	Ma	rtin Schweitzer		
STREET ADDRESS	I halon	0000	€3STHEETA!		06 Court Street	· ·	
STREET ALIDNESS	11.7. 1174144	441 <del>4</del> 5		1 12	00 0001 0 001 000		

14. Thereby 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 information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under each, 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 12 or Block 13 if chapted, or on an attachment with an address, with all other like empowered.

S. A. BRADY

1/21/99