2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 521102

City-St-Zip: TEMPLE TERRACE, FL 33617

Entity Name: BRANSFORD INSURANCE ASSOCIATES, INC.

FILED Apr 30, 2008 Secretary of State

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:		
5035 E BUSCH B SUITE 7	LVD					
TAMPA, FL 3361	7					
Current Mailing Address:			New Mailing Addre	New Mailing Address:		
810 BEN LOMON TEMPLE TERRAG			810 BEN LOMOND TEMPLE TERRACE		42	
FEI Number: 59-1713	3644 FEI Nun	nber Applied For()	FEI Number Not Applicable ()	Certificat	e of Status Desired ()	
Name and Addre	ess of Current R	egistered Agent:	Name and Address	Name and Address of New Registered Agent:		
BRANSFORD, JA 810 BEN LOMON TEMPLE TERRAG	D DRIVE	US				
The above named in the State of Flor		nis statement for the p	urpose of changing its register	red office or re	egistered agent, or both,	
SIGNATURE:						
E	Electronic Signat	ure of Registered Age	ent	Date		
Election Campaign F	Financing Trust Fu	nd Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
	() Delete SFORD, JAMES C., EN LOMOND DRIVE		Title: Name: Address:	() Change () Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: JAMES C BRANSFORD PD 04/30/2008