


**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Mar 29, 2004 08:00 AM
Secretary of State**

DOCUMENT # 527664 1. Entity Name BRUNS & BRUNS, INC.	
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Principal Place of Business 1072 SIXTH AVENUE, N. NAPLES, FL 34102 US	Mailing Address 1072 SIXTH AVENUE, N. NAPLES, FL 34102 US
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DO NOT WRITE IN THIS SPACE



03122004 No Chg-P CR2E034 (10/03)

4. FCI Number 59-1720871	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BRUNS, DAVID ^S B. 1072 SIXTH AVE., SOUTH NAPLES, FL 34102

**DO NOT WRITE
IN THIS SPACE**

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 *David B. Bruns* DATE 3-24-04
Signature, word or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reestablishing)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BRUNS, LINDA M. 5305 TAMARIND RIDGE DRIVE NAPLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST BRUNS, DAVID B. 5305 TAMARIND RIDGE DRIVE NAPLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP BRUNS, DAVID B. 5305 TAMARIND RIDGE DRIVE NAPLES, FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD BRUNS, RONALD C 515 N 4TH STREET SAINT MARYS, KS 66536
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

U000000098331
03/29/04-80036-009 150.00

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Ronald C. Bruns* DATE 3-24-04 DAYLINE PHONE # 239-261-5865
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR