

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 610908

Entity Name: R.A. BRANDON & CO., INC.

FILED  
Mar 20, 2009  
Secretary of State

## Current Principal Place of Business:

217 ARAGON AVE  
P.O.BOX 340847  
CORAL GABLES, FL 33134

## New Principal Place of Business:

217 ARAGON AVE  
CORAL GABLES, FL 33134

## Current Mailing Address:

P.O. BOX 140849  
CORAL GABLES, FL 33134

## New Mailing Address:

P.O. BOX 140849  
CORAL GABLES, FL 33114

FEI Number: 59-1899398

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERT BRANDON  
217 ARAGON AVE  
CORAL GABLES FL, FL 33134 US

## Name and Address of New Registered Agent:

ROBERT BRANDON  
217 ARAGON AVE  
CORAL GABLES, FL 33134 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:

03/20/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BRANDON, ROBERT A,  
Address: 9440 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL

Title: S ( ) Delete  
Name: BRANDON, MARIANNE,  
Address: 9440 OLD CUTLER LANE  
City-St-Zip: CORAL GABLES, FL

Title: V ( ) Delete  
Name: BRANDON, TODD A.,  
Address: 217 ARAGON AVE.  
City-St-Zip: CORAL GABLES, FL

Title: T ( ) Delete  
Name: BRANDON, GARRY H.,  
Address: 217 ARAGON AVE.  
City-St-Zip: CORAL GABLES, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: TODD A BRANDON

VP

03/20/2009

Electronic Signature of Signing Officer or Director

Date