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Mar 04 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 626197 (8)

1. Corporation Name
BRANFORD SALES, INC.

Principal Place of Business
U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008

Mailing Address
U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008-0238



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/15/1979	3a. Date of Last Report 03/21/1996
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.			4. FEI Number 59-1934270	Applied For Not Applicable
22. City & State	27. City & State			5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23. Zip	28. Zip	Country	Country	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24. Country	29. Country	30. Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

HATCH, LEON D.
U.S. HIGHWAY 27 EAST, BOX 238
BRANFORD FL 32008

10. Name and Address of New Registered Agent

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. City	FL 85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATCH, LEON D.	1.2 NAME	
STREET ADDRESS	P O BOX 238 HWY 247 - N/A	1.3 STREET ADDRESS	
CITY - ST - ZIP	BRANFORD FL	1.4 CITY - ST - ZIP	
TITLE	STD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATCH, RUDOLPH	2.2 NAME	
STREET ADDRESS	REYNOLDS ST P O BOX 238 N/A	2.3 STREET ADDRESS	
CITY - ST - ZIP	BRANFORD FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATCH, LEON D JR.	3.2 NAME	
STREET ADDRESS	P O BOX 314, HWY 27 E N/A	3.3 STREET ADDRESS	
CITY - ST - ZIP	BRANFORD FL	3.4 CITY - ST - ZIP	
TITLE	D	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATCH, CHARLES E	4.2 NAME	
STREET ADDRESS	P O BOX 184, HWY 247 N/A	4.3 STREET ADDRESS	
CITY - ST - ZIP	BRANFORD FL	4.4 CITY - ST - ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HATCH, WALTER R	5.2 NAME	
STREET ADDRESS	HWY 129, P O BOX 238 N/A	5.3 STREET ADDRESS	
CITY - ST - ZIP	BRANFORD FL	5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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 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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Rudolph Hatch* RUDOLPH HATCH 2-14-97 (904) 985-1425
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day, Month, Year

CR2E034 (9/96)