## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 629465**

FILED Mar 11, 2009 Secretary of State

Entity Name: BROTHERS TWO DEVELOPERS, INC.

Current Principal Place of Business:			New Principal Place of Business:	
6601 SPAI SEBRING	RTA RD i, FL 33875	US		
Current Mailing Address:		New Mailing Address:		
PO BOX 1 SEBRING	1824 i, FL 33871	US		
El Number	r: 59-1927212	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:
145 S COI SEBRING SEBRING	ON, ESQ. J MMERCE AV i, FLORIDA i, FL 33870 U e named entity	JS	numbers of shanging its registers	
		/ Subillies tills statement for the i	DUI DOSE OI CHAHUIHU IIS TEUISIELE	d office or registered agent, or both.
n the Stat	e of Florida.	submits this statement for the p	purpose of changing its registere	d office or registered agent, or both,
	e of Florida. RE:			d office or registered agent, or both,
	e of Florida. RE:	onic Signature of Registered Ag		Date
BIGNATU	e of Florida.  RE: Electro			
SIGNATUI	e of Florida.  RE: Electro	onic Signature of Registered Ag	ent	
SIGNATU	e of Florida.  RE: Electro  impaign Financi	onic Signature of Registered Ag ng Trust Fund Contribution ( ).  CTORS:  ) Delete J. TIMOTHY A RD	ent	Date
Election Cal DFFICER itle: lame: .ddress:	Ee of Florida.  Electro  Electro  Empaign Financi  S AND DIRE  PD ( BLACKMAN, 6601 SPARTA SEBRING, FL	onic Signature of Registered Ag ng Trust Fund Contribution ( ).  CTORS:  ) Delete J. TIMOTHY A RD  . 33870  ) Delete GARY W TA RD	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: J. TIMOTHY BLACKMAN PD 03/11/2009