

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 629465

FILED  
Mar 10, 2011  
Secretary of State

**Entity Name:** BROTHERS TWO DEVELOPERS, INC.

**Current Principal Place of Business:**

6601 SPARTA RD  
SEBRING, FL 33875 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 1824  
SEBRING, FL 33871 US

**New Mailing Address:**

**FEI Number:** 59-1927212

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LIVINGSTON, ESQ. J  
445 S COMMERCE AVE  
SEBRING, FLORIDA  
SEBRING, FL 33870 US

**Name and Address of New Registered Agent:**

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BLACKMAN, J. TIMOTHY  
**Address:** 6601 SPARTA RD  
**City-St-Zip:** SEBRING, FL 33875

**Title:** VP  
**Name:** BLACKMAN, GARY W  
**Address:** 6601 SUPARTA RD  
**City-St-Zip:** SEBRING, FL 33875

**Title:** ST  
**Name:** SANDERS, MILDRED J  
**Address:** 6601 SPARTA RD  
**City-St-Zip:** SEBRING, FL 33875

**Title:** D  
**Name:** BLACKMAN, MARTILE  
**Address:** 6601 SPARTA ROAD  
**City-St-Zip:** SEBRING, FL 33875

**Title:** D  
**Name:** BLACKMAN, REGINA  
**Address:** 6601 SPARTA ROAD  
**City-St-Zip:** SEBRING, FL 33875

I hereby 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 all other like empowered.

**SIGNATURE:** J. TIMOTHY BLACKMAN

PRES

03/10/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date