

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 26, 2004 8:00 am**  
**Secretary of State**

01-26-2004 90007 013 \*\*\*150.00

**DOCUMENT # 635327**

1. Entity Name  
**PETER BRADLEY, INC., DESIGNER JEWELRY**



Principal Place of Business  
**1861 WHITECAP CIR  
NORTH FORT MYERS, FL 33903 US**

Mailing Address  
**1861 WHITECAP CIR  
NORTH FORT MYERS, FL 33903 US**

**54000688**

2. Principal Place of Business  
**4085 HANCOCK Bridge Pkwy  
Suite, Apt. #, etc. 111-152  
City & State N Fort Myers, FL  
Zip 33903 Country Lee**

3. Mailing Address  
**4085 HANCOCK Bridge Pkwy  
Suite, Apt. #, etc. 111-152  
City & State N Fort Myers, FL  
Zip 33903 Country Lee**



01192004 Chg-P CR2E034 (10/03)

4. FEI Number  
**59-1940379**

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  
**BRADLEY, PETER  
1861 WHITECAP CIRCLE  
NORTH FORT MYERS, FL 33903**

7. Name and Address of New Registered Agent  
Name  
Street Address (P.O. Box Number is Not Acceptable)  
**4085 HANCOCK Bridge Pkwy  
Ste 111-152  
City N Fort Myers FL Zip Code 33903**

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 Peter Bradley (NOTE: Registered Agent signature required when reinstating) DATE Jan 19-04

**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		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT BRADLEY, PETER 1861 WHITECAP CIRCLE N. FT. MYERS, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>4085 HANCOCK Bridge Pkwy 111-152 N Fort Myers, FL 33903</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VS BRADLEY, JOANN 1861 WHITECAP CIR. N FT MYERS, FL <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>4085 HANCOCK Bridge Pkwy 111-152 N Fort Myers, FL 33903</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 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: Peter Bradley SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Jan 19-04 Daytime Phone #