2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 05, 2008 08:00 A **DOCUMENT # 645532** 1. Entity Name **Secretary of State** MARY W. BRAND, INC. Mailing Address Principal Place of Business **4554 CENTRAL AVE 4554 CENTRAL AVE** SUITE B-1 SUITE B-1 ST PETERSBURG, FL 33711 ST PETERSBURG, FL 33711 02272008 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-1952236 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRAND, MARY W DO NOT WRITE 4554 CENTRAL AVE SUITE B-1 IN THIS SPACE ST PETERSBURG, FL 33711 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. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent algnature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE 000000847897 03/19/08-80037-024 150.00 NAME BRAND, MARY W. 1430 SEA GULL DRIVE S STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL TITLE VI NAME BRAND, MARY W. STREET ADDRESS 1430 SEA GULL DRIVE S CITY-ST-ZIP ST. PETERSBURG, FL SD TITLE BRAND, MARY W. NAME 1430 SEA GULL DRIVE \$ STREET ADDRESS DO NOT WRITE CITY-ST-ZIP ST. PETERSBURG, FL IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

May W. Brand