

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000000006

FILED  
Jan 24, 2006  
Secretary of State

Entity Name: BRUMBY ENTERPRISES, INC.

## Current Principal Place of Business:

519 MAIN ST.  
FRANKLIN, LA 70538

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 999  
FRANKLIN, LA 705380999

## New Mailing Address:

FEI Number: 72-0307970

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILLIS, DEBRA  
518 FIRST AVENUE  
DESTIN, FL 32541 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PCTD ( ) Delete  
Name: HORNE, T. LEE III  
Address: 519 MAIN ST BOX 999  
City-St-Zip: FRANKLIN, LA 705380999 US

Title: V ( ) Delete  
Name: WILLIS, DEBRA  
Address: 518 FIRST AVE  
City-St-Zip: DESTIN, FL 32541 US

Title: S ( ) Delete  
Name: KELLY, WADE N  
Address: 3705 1/2 CREOLE ST.  
City-St-Zip: LAKE CHARLES, LA 70601 US

Title: VD ( ) Delete  
Name: HORNE, AMILDA K  
Address: 816 ARCHDALE DR.  
City-St-Zip: DURHAM, NC 27707 US

Title: D ( ) Delete  
Name: HORNE, ROBERTA E  
Address: 2604 GRACEWOOD DR.  
City-St-Zip: GREENSBORO, NC 27408 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: T. LEE HORNE, III

PCTD

01/24/2006

Electronic Signature of Signing Officer or Director

Date