

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2008 08:00 AM
Secretary of State

DOCUMENT # F01000000006

1. Entity Name
BRUMBY ENTERPRISES, INC.



Principal Place of Business
**519 MAIN ST.
FRANKLIN, LA 70538**

Mailing Address
**PO BOX 999
FRANKLIN, LA 70538-0999**



01072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
72-0307970

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**HORNE, MARGARET L
155 CALHOUN AVE
DESTIN, FL 32541**

**DO NOT WRITE
IN THIS SPACE**

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 signature required when reissuing)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	PCTD
NAME	HORNE, T. LEE III
STREET ADDRESS	519 MAIN ST BOX 999
CITY - ST - ZIP	FRANKLIN, LA 705380999
TITLE	V
NAME	HORNE, AMILDA
STREET ADDRESS	1316 MARTIN LUTHER KING JR PKWY
CITY - ST - ZIP	DURHAM, NC 27707
TITLE	S
NAME	KELLY, WADE N
STREET ADDRESS	1777 RYAN ST
CITY - ST - ZIP	LAKE CHARLES, LA 70601
TITLE	VD
NAME	HORNE, ROBERTA E
STREET ADDRESS	2804 GRACEWOOD DR
CITY - ST - ZIP	GREENSBORO, NC 27408
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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01/14/08-80007-012 150.00

**DO NOT WRITE
IN THIS SPACE**

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:

T. Lee Horne III
T. Lee Horne III

Date

Daytime Phone #

1-7-8 800-746-1705