

2007 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F04000006630

Entity Name: BRENNAN ASSOCIATES, INC.

FILED
Dec 05, 2007
Secretary of State

Current Principal Place of Business:

1125 B SPARKLEBERRY LANE
COLUMBIA, SC 29223

New Principal Place of Business:

1233 WASHINGTON STREET
SUITE 500
COLUMBIA, SC 29201

Current Mailing Address:

1125 B SPARKLEBERRY LANE
COLUMBIA, SC 29223

New Mailing Address:

1233 WASHINGTON STREET
SUITE 500
COLUMBIA, SC 29201

FEI Number: 57-0956658

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: DALE W. MORRIS

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BRENNAN, JAMES J
Address: 1125 B SPARKLEBERRY LANE
City-St-Zip: COLUMBIA, SC 29223

Title: D () Delete
Name: CARTER, AMANDA
Address: 1125 B SPARKLEBERRY LANE
City-St-Zip: COLUMBIA, SC 29223

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BRENNAN, JAMES J
Address: 1233 WASHINGTON STREET, SUITE 500
City-St-Zip: COLUMBIA, SC 29250

Title: D (X) Change () Addition
Name: CARTER, AMANDA
Address: 1233 WASHINGTON STREET, SUITE 500
City-St-Zip: COLUMBIA, SC 29250

I hereby certify that the information supplied with this filing does not qualify 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: AMANDA CARTER

D

12/05/2007

Electronic Signature of Signing Officer or Director

Date