2006 FOR PROFIT CORPORATION ANNUAL REPORT

Apr 24, 2006 08:00 AN Secretary of State

FILED

DOCUMENT # F34063 1. Entity Name SCOTT BRAY DESIGN ASSOC			
Principal Place of Business 2016B ALDEN ROAD ORLANDO, FL 32803 US	Mailing Address 2016B ALDEN ROAD ORLANDO, FL 32803	US	

No Chg-P CR2E034 (11/05) 04142006 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-2181112 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRAY, H SCOTT DO NOT WRITE 2016B ALDEN ROAD ORLANDO, FL 32803 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, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Added to Fees Trust Fund Contribution. After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS PD TITLE BRAY, HISCOTT NAME STREET ADDRESS 2016B ALDEN ROAD CITY-ST-ZIP ORLANDO, FL 32803 U00000529048 NAME 05/05/06-80060-013 150.0d STREET ADDRESS CITY ST-7IP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET ADDRESS CITY-ST-ZIP TOTLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME

12. I hereby certify that the information supplied with this filling does not quality for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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 on the legeliver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in clock 10 or block 11 in changed, or on an affect, florid accurate with an address, with all other like empowered.

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP