2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F86582

FILED Jan 03, 2007 Secretary of State

Entity Name: BRYAN'S ACE HOME CENTER, INC.

Current Principal Place of Business:		New Principal Place of Business:		
HWY 100 PO BOX 5 KEYSTON	48 IE HEIGHTS, F	FL 32656		
Current Mailing Address:		New Mailing Address:		
HWY 100 PO BOX 5 KEYSTON	48 IE HEIGHTS, F	FL 32656		
El Number	: 59-2208335	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	Address of C	Current Registered Agent:	Name and Address o	f New Registered Agent:
GIBBS, W 7233 SR 2	:1 N	32656 US		
KEYSTON	IE HGTS, FL 3	02000 00		
Γhe above	·		ourpose of changing its registered	d office or registered agent, or both,
Γhe above	named entity e of Florida.		ourpose of changing its registered	d office or registered agent, or both,
The above n the State	named entity e of Florida. RE:			d office or registered agent, or both, Date
The above n the State SIGNATUI	named entity e of Florida. RE: Electror	submits this statement for the բ		
The above n the State BIGNATUI	named entity e of Florida. RE: Electror	submits this statement for the particles of Registered Agree of Registered Agree of Trust Fund Contribution ().	ent	
The above n the State BIGNATUI	named entity e of Florida. RE: Electror mpaign Financin S AND DIREC	submits this statement for the particles of Registered Agric Signature of Registered Agric Strust Fund Contribution (). TORS: Delete THWELL, EW ST.	ent	Date
The above n the State SIGNATUI	e named entity e of Florida. RE: Electron mpaign Financin S AND DIREC VP (ROGER D. RO 7711 BEACHVI KEYSTON HGT P (GIBBS, WILLIA 7233 SR 21 N	submits this statement for the particles of Registered Agray Trust Fund Contribution (). TORS: Delete THWELL, EW ST. FS, FL 32656 Delete M B,	ent ADDITIONS/CHANGE Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

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: DEBORAH K GIBBS S 01/03/2007