

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 30, 2003 8:00 am
Secretary of State

0665661 AB

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1. Entity Name
BRACH'S CONFECTIONS, INC.

04-30-2003 90463 001 ***150.00
04-30-2003 90463 002 *****8.75

Principal Place of Business
**4120 JERSEY DR
CHATTANOOGA TN 37421
US**

Mailing Address
**P O BOX 22427
CHATTANOOGA TN 37422
US**



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

4. FEI Number **36-3484272**
Applied For
 Not Applicable

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**THE PRENTICE-HALL CORPORATION SYSTEM, INC.
1201 HAYS ST.
TALLAHASSEE FL 32301**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PSD	<input type="checkbox"/> Delete
NAME	KOTECKO, KEVIN	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	
TITLE	D	<input type="checkbox"/> Delete
NAME	JACOBS, ANDREAS	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	
TITLE	T	<input type="checkbox"/> Delete
NAME	HAGEDORN, JAMES	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	DENIRO, ALLAN	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	TWEN, DEVAN	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	
TITLE	D	<input type="checkbox"/> Delete
NAME	VOLKER, MATHIAS	
STREET ADDRESS	4120 JERSEY PIKE	
CITY-ST-ZIP	CHATTANOOGA TN 37421	

TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Mitchell, Ned	
STREET ADDRESS	4120 Jersey Pike	
CITY-ST-ZIP	Chattanooga, TN 37421	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Pastor, Mathias	
STREET ADDRESS	4120 Jersey Pike	
CITY-ST-ZIP	Chattanooga, TN 37421	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kuppel, Ekkehard	
STREET ADDRESS	4120 Jersey Pike	
CITY-ST-ZIP	Chattanooga, TN 37421	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Haak, Charles	
STREET ADDRESS	4120 Jersey Pike	
CITY-ST-ZIP	Chattanooga, TN 37421	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: James G. Hagedorn **REQUIRED** James G. Hagedorn 4/10/2003 423.899.1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/02)