

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90193 041 ***150.00

DOCUMENT # H10769

1. Entity Name

BRADFORD SERVICE CORPORATION, INC.



Principal Place of Business

7636 NW 96TH TERR
TAMARAC, FL 33321 US

Mailing Address

P.O. BOX 25652
TAMARAC, FL 33320 US

DO NOT WRITE IN THIS SPACE



03282006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2419466

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BRADFORD, WILLIAM
7500 NW 5TH PL 101
POMPANO BEACH, FL 33063

**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

William Bradford

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3-29-06

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME BRADFORD, WILLIAM
STREET ADDRESS 7500 NW 5TH PL 101
CITY-ST-ZIP POMPAÑO BEACH, FL 33063

TITLE SD
NAME BRADFORD, JEAN F.
STREET ADDRESS 7500 NW 5TH PL 101
CITY-ST-ZIP POMPAÑO BEACH, FL 33063

TITLE TD
NAME WARE, JANE B
STREET ADDRESS 7636 NW 96TH TERRACE
CITY-ST-ZIP TAMARAC, FL 33321

TITLE VD
NAME BRADFORD, ROGER W.
STREET ADDRESS 7500 NW 5TH PL 101
CITY-ST-ZIP POMPAÑO BEACH, FL 33063

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**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:

William Bradford

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-29-06

954-
721-2496