2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H10769

FILED Jan 07, 2009 Secretary of State

Entity Name: BRADFORD SERVICE CORPORATION, INC.

Current Principal Place of Business:		New Principal Plac	New Principal Place of Business:	
	96TH TERR C, FL 33321	US		
Current N	lailing Addre	ss:	New Mailing Addre	ess:
P.O. BOX TAMARAC	25652 C, FL 33320	US		
FEI Number	: 59-2419466	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and	l Address of	Current Registered Agent:	Name and Address	of New Registered Agent:
7500 NW	RD, WILLIAM 5TH PL 101 O BEACH, FL	33063 US		
Tl		submits this statement for the	purpose of changing its registe	red office or registered agent, or both,
n the State	e of Florida.			
n the State	RE:	nic Signature of Registered A	gent	Date
in the State	RE:Electro	nic Signature of Registered Aલ ng Trust Fund Contribution ().	gent	Date
in the State	RE:Electro	ng Trust Fund Contribution ().		Date GES TO OFFICERS AND DIRECTOR
n the State	RE: Electro mpaign Financir S AND DIREC PD (BRADFORD, N 7500 NW 5TH	ng Trust Fund Contribution (). CTORS:) Delete WILLIAM,		
n the State BIGNATUI Election Car OFFICER: Title: Name: Address:	Electro mpaign Financia S AND DIRECT PD (BRADFORD, N 7500 NW 5TH POMPANO BE SD (BRADFORD, N 7500 NW 5TH	ng Trust Fund Contribution (). CTORS:) Delete WILLIAM, PL 101 ACH, FL 33063) Delete JEAN F.,	ADDITIONS/CHAN Title: Name: Address:	GES TO OFFICERS AND DIRECTOR
n the State SIGNATUI Election Car OFFICER Title: Name: Address: City-St-Zip: Fitle: Name: Address:	Electro mpaign Financin S AND DIRECT PD (BRADFORD, V 7500 NW 5TH POMPANO BE SD (BRADFORD, V 7500 NW 5TH POMPANO BE	ng Trust Fund Contribution (). CTORS:) Delete MILLIAM, PL 101 EACH, FL 33063) Delete JEAN F., PL 101 EACH, FL 33063) Delete BH TERRACE	ADDITIONS/CHAN Title: Name: Address: City-St-Zip: Title: Name: Address:	GES TO OFFICERS AND DIRECTOR () Change () Addition

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: JANE B WARE TD 01/07/2009