

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Feb 21, 1999 8:00 am
Secretary of State

02-21-1999 90034 035 ***158.75

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PROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # H21429

1. Corporation Name

E.R. BRADLEY'S, INC.

Principal Place of Business

111 BRADLEY PLACE
PALM BEACH FL 33480

Mailing Address

111 BRADLEY PLACE
PALM BEACH FL 33480

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/18/1984

4. FEI Number

59-2466119

Applied For

☒ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

CONIGLIO, FRANK
111 BRADLEY PL.
PALM BCH. FL 33480

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	JURICH, LISA	
STREET ADDRESS	111 BRADLEY PLACE	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	CONIGLIO, GAIL L	
STREET ADDRESS	111 BRADLEY PLACE	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CONIGLIO, DONDRA	
STREET ADDRESS	111 BRADLEY PLACE	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	REALE, MITCHELL L	
STREET ADDRESS	111 BRADLEY PLACE	
CITY-ST-ZIP	PALM BEACH FL	
TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	FORGONY, DENNIS	
STREET ADDRESS	111 BRADLEY PLACE	
CITY-ST-ZIP	PALM BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	JENNIFER C. PEVERINI	
1.3 STREET ADDRESS	233 ROYAL PUNGANWAY #2	
1.4 CITY-ST-ZIP	PALM BEACH, FL. 33480	
2.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	MYLENE B. NARDOLLO	
2.3 STREET ADDRESS	5239 CANNONWAY	
2.4 CITY-ST-ZIP	W.P.B., FL. 33415	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:


SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/12/99

Date

561-833-3520

Daytime Phone #