

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75902

FILED
Feb 22, 2005
Secretary of State

Entity Name: BEXLEY BROTHERS, INC.

Current Principal Place of Business:

4809 E C-466
OXFORD, FL 34484 US

New Principal Place of Business:

Current Mailing Address:

4809 E C-466
OXFORD, FL 34484 US

New Mailing Address:

P O BOX 469
OXFORD, FL 34484 US

FEI Number: 59-2862425

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEXLEY, CRAIG
4809 E C-466
OXFORD, FL 34484 US

Name and Address of New Registered Agent:

BEXLEY, CRAIG
4809 E C-466
P O BOX 469
OXFORD, FL 34484 US

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.

SIGNATURE: CRAIG BEXLEY

02/22/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BEXLEY, CRAIG,
Address: 10107 ORANGE GROVE DRIVE
City-St-Zip: TAMPA, FL

Title: VP () Delete
Name: BEXLEY, PATRICK,
Address: 6650 WISTERIA LOOP
City-St-Zip: LAND O'LAKES, FL

Title: ST () Delete
Name: MILLER, ANNETTE M,
Address: 4809 E. C-466
City-St-Zip: OXFORD, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: BEXLEY, PATRICK,
Address: 3740 SWAN'S LANDING
City-St-Zip: LAND O'LAKES, FL 34639

Title: ST (X) Change () Addition
Name: MILLER, ANNETTE M,
Address: 250 CR 416 SOUTH
City-St-Zip: LAKE PANASOFFKEE, FL 33538

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CRAIG BEXLEY

PRES

02/22/2005

Electronic Signature of Signing Officer or Director

Date