2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J75902

Name:

Address:

City-St-Zip:

MILLER, ANNETTE M,

LAKE PANASOFFKEE, FL 33538

250 CR 416 SOUTH

FILED Apr 13, 2007 Secretary of State

Entity Nan	ne: BEXLE	Y BROTHERS, INC.		•	
Current Principal Place of Business:			New Principal Place	of Business:	
3649 CR 21 OXFORD, I		US			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
P O BOX 40 OXFORD, I		US			
FEI Number:	59-2862425	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address of	Name and Address of New Registered Agent:	
BEXLEY, CRAIG 4809 E C-466 P O BOX 469 OXFORD, FL 34484 US			BEXLEY, CRAIG 3649 CR 214 OXFORD, FL 34484	US	
The above in the State	named entity of Florida.	y submits this statement for the pu	rpose of changing its registere	d office or registered agent, or both,	
SIGNATURE: CRAIG L BEXLEY				04/13/2007	
	Electro	onic Signature of Registered Agen	t	Date	
Election Cam	paign Financi	ing Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BEXLEY, CR	() Delete AIG, GE GROVE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BEXLEY, PA		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	ST (() Delete	Title [.]	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

SIGNATURE: CRAIG L BEXLEY PRES 04/13/2007