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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K63530

(5)

BRADLEY GROUP, INC.

FILED	
Apr 28 1997 8	8:00am
Secretary of	State

Principal Place of Business	pal Place of Business Mailing Address		I (BB) Bill BED DIEDE LIIDI DIEDD EISIC ODER D	iidii 010(1 0101)	OLDEL DIBIS			
4370 SO. TAMIAMI TRAIL 4370 SO. TAMIAMI TRAIL STE. 320 STE. 320 SARASOTA FL 34231 SARASOTA FL 34231 SARASOTA FL 34231								
SARASOTA FL 34231 US		US	A1		3. Date Incorporated or Qualified	3a. Date	of Last F	Report
					02/03/1989	08/08/		тероп
2. Principal Place of Busin	ess	2a. Mailing Address			4. FEI Number	<u> </u>	A	pplied For
21		26			16-1319632		N	ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & State		City & State			6. Election Campaign Financing			
23		28			Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Count	у	8. This corporation has liability for i			
24	25	29	30			Yes 🔲		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	and Address of Current	Registered Agent			10. Name and Address of New Re	dstered Ag	ent	
BRADLEY, SR. F	<u></u>		8	Name				
	IMI TRAIL, SUITE, 239	(2, 2)	6:	Street Add	dress (P.O. Box Number is Not Acceptab	lo)		
SARASOTA FL 3		320)	b.	SHEEL AGO	aress (F.O. Box Number is Not Acceptab	SVIT	€ 3	20
0/41/00/// 20	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		8	3				
	/		L.					
			8	4 City		FL	8 5 Zip	Code
11. Pursuant to the prevision	ons of Sections 607 0502	and 607 1508. Florida Sta	tutes, the abo	ve-named cor	poration submits this statement for the p	uroose of ch	anging i	ts registered
office or registered and	ent, or both, in the State of	f Florida, Such change wa	is authorized l	by the corpora	poration submits this statement for the pation's board of directors. I hereby accept	t the appoin	tment as	registered
7 174	and act optime onligat	iona dr. Xegition 607.0505,	Fibrida Statuti	98.				
SIGNATURE Signatur typed i	or printed name of egistered agent		SOTE - Ropetared A	nont cionsture (Anu	aired when reinstating)	DATE		
12.	OFFICERS AND		13.	genic signature requ	ADDITIONS/CHANGES TO OFFIC		RECTOR	RS (N 12
TITLE D	OT TOETIO TO	DELETE	1.1 BILE		7,00110,10,010,110,000,10		Change	Addition
T	ROBERT J. SR.		1.2 NAME			•		
STREET ADDRESS 4370 SO.	TAMIAMI TRAIL, SUITE	220 220		T ADDRESS				
0101007	A GI	. poo 9 =			2011	E 320	•	
TITLE SAKASUTA	<u> </u>	DELFTE	1.4 CITY - 2.1 TRLE	-51 · ZIF			Change	Addition
NAME			2.2 NAME			L	, onunge	, , , , , , , , , , , , , , , , , , ,
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TITLE				Į.		ļ	1 Change	
NAME			3.2 NAME					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		DEITE	34 CITY				Change	Addition
TITLE		☐ DELETE	4 1 TITLE			L	, virange	
NAME ,			4. 2 NAM					
STREET ADDRESS			- 1	ET ADDRESS				
CITY-ST-ZIP			4.4 City	S1-ZiP			Lake	- A 4 300
TITLE		L DELETE	5.1 1 11.6				J Change	Addition
NAME			5.2 NAM					
STREET ADDRESS			5.3 STRE	E1 ADDRESS				
CITY-ST-ZIP			5.4 CITY	\$1-ZIP				<u>. </u>
TITLE		☐ DELETE	61 TITLE			L.] Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STHE	E1 AUDRESS				
CITY-ST-ZIP			5.4 CITY					
14 I do haraby cartify that	the information supplied	with this filing dogs not ou	alify for the ex	omntion ctate	rd in Section 119 07/3\fi). Florida Statutes	I further co	artify that	tho

I do hereby certify that the information supplied with this filling 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 13 if changed, or on an attachment with an address.