


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 27, 2006 08:00 AM
Secretary of State**

DOCUMENT # K64120 1. Entity Name BRUNO-EHLERS ENTERPRISES, INC.		
Principal Place of Business 2437 SE 17TH ST., STE 102 OCALA, FL 34471 US		Mailing Address 2437 SE 17TH ST., STE 102 OCALA, FL 34471 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent EHLERS, HENRY A. 2437 SE 17TH ST., STE 102 OCALA, FL 34471		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent.		
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable.</small>		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSD EHLERS, HENRY A 2437 SOUTHEAST 17TH STREET SUITE 102 OCALA, FL 34471	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.		
SIGNATURE: <u><i>Henry A. Ehlers</i></u> PRESIDENT <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		JAN 26, 2006 358.351.3611 <small>Date Daytime Phone #</small>



01052006 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2937408	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	

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02/07/06-80040-002 158.75

**DO NOT WRITE
IN THIS SPACE**