

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 22, 2003 8:00 am
Secretary of State

0504117 AV

04-22-2003 90031 023 ***150.00

DOCUMENT # L07579



1. Entity Name
BRANHAM CONSTRUCTION, INC.

Principal Place of Business
**924 FAIRLANE DRIVE
SUITE #5
LAKELAND FL 33809
US**

Mailing Address
**924 FAIRLANE DRIVE
SUITE #5
LAKELAND FL 33809
US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **65-0133631**

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BRANHAM, WILLIAM P.
8007 RIDGE POINTE DRIVE W.
LAKELAND FL 33810**

Name
Street Address (P.O. Box Number is Not Acceptable)
City **FL** Zip Code

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 *William P. Branham* **William P. Branham, President**

4-18-03
DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P <input type="checkbox"/> Delete
NAME	BRANHAM, WILLIAM P.
STREET ADDRESS	8007 RIDGE POINTE DRIVE W.
CITY-ST-ZIP	LAKELAND FL 33810
TITLE	VP <input type="checkbox"/> Delete
NAME	BRANHAM, KENNETH W
STREET ADDRESS	8020 WALT WILLIAMS RD
CITY-ST-ZIP	LAKELAND FL 33809
TITLE	S <input type="checkbox"/> Delete
NAME	BRANHAM, CATHLINE M
STREET ADDRESS	8007 RIDGE POINTE DR
CITY-ST-ZIP	LAKELAND FL 33810
TITLE	T <input type="checkbox"/> Delete
NAME	BRANHAM, CHASITY B
STREET ADDRESS	8020 WALT WILLIAMS RD
CITY-ST-ZIP	LAKELAND FL 33809
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Branham, Kenneth W.
STREET ADDRESS	1834 Westminster Court
CITY-ST-ZIP	Lakeland, Florida 33809
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	T <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Branham, Chasity B
STREET ADDRESS	1834 Westminster Court
CITY-ST-ZIP	Lakeland, Florida 33809
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

12. 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 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 all other like empowered.

SIGNATURE: *William P. Branham* **William P. Branham**

4-18-03 (863) 816-1414

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/02)