

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L90193

FILED  
Jan 08, 2004  
Secretary of State

Entity Name: THE BRILLIS CORPORATION

## Current Principal Place of Business:

1115 N. RONALD REEPN BLVD  
LONGWOOD, FL 32750 US

## New Principal Place of Business:

1115 N. RONALD REAGAN BLVD  
#115  
LONGWOOD, FL 32750 US

## Current Mailing Address:

PO BOX 300106  
CASSELBERRY, FL 32730 US

## New Mailing Address:

FEI Number: 59-3019377      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ROBERTS, DEBRA E  
1115 N. RONALD REAGAN BV 115  
LONGWOOD, FL 32750 US

## Name and Address of New Registered Agent:

ROBERTS, DEBRA E  
1115 N. RONALD REAGAN BLVD  
#115  
LONGWOOD, FL 32750 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: DEBRA E ROBERTS

01/08/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ROBERTS, DEBRA E  
Address: 674 MAITLAND AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: VP ( ) Delete  
Name: BRILLIS, CHAD M  
Address: 674 MAITLAND AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: S ( ) Delete  
Name: HUDSON, WENDY B  
Address: 674 MAITLAND AVENUE  
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: ROBERTS, DEBRA E  
Address: 1115 N RONALD REAGAN BLVD #115  
City-St-Zip: LONGWOOD, FL 32750

Title: VP (X) Change ( ) Addition  
Name: BRILLIS, CHAD M  
Address: 1115 N RONALD REAGAN BLVD #115  
City-St-Zip: LONGWOOD, FL 32750

Title: S (X) Change ( ) Addition  
Name: HUDSON, WENDY B  
Address: 1115 N RONALD REAGAN BLVD #115  
City-St-Zip: LONGWOOD, FL 32750

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: DEBRA E ROBERTS

P

01/08/2004

Electronic Signature of Signing Officer or Director

Date