

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M82647

FILED  
May 04, 2007  
Secretary of State

Entity Name: BRYANT GOODMAN, INC.

**Current Principal Place of Business:**

3442 WESTFORD DR.  
APOPKA, FL 32712

**New Principal Place of Business:**

**Current Mailing Address:**

3442 WESTFORD DR.  
APOPKA, FL 32712

**New Mailing Address:**

FEI Number: 59-2889906

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GOODMAN, KERRY  
3442 WESTFORD DR.  
APOPKA, FL 32712 US

**Name and Address of New Registered Agent:**

GOODMAN, GRAYSON  
3442 WESTFORD DR.  
APOPKA, FL 32712 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: GRAYSON GOODMAN

05/04/2007

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: DPC ( ) Delete  
Name: GOODMAN, KERRY  
Address: 3442 WESTFORD DR.  
City-St-Zip: APOPKA, FL 32712

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DPC (X) Change ( ) Addition  
Name: GOODMAN, GRAYSON  
Address: 3442 WESTFORD DR.  
City-St-Zip: APOPKA, FL 32712

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

SIGNATURE: GRAYSON GOODMAN

PRES

05/04/2007

Electronic Signature of Signing Officer or Director

Date