


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2005 8:00 am
Secretary of State

05-04-2005 90126 013 ****61.25

DOCUMENT # N04000004963			
1. Entity Name BRANTLEY'S AUTO PURCHASING ADVISORS, INC.			
Principal Place of Business 1532 E SILVER SPRINGS BLVD. STE. 2 OCALA, FL 34471 US		Mailing Address 1532 E SILVER SPRINGS BLVD. STE. 2 OCALA, FL 34471 US	
2. Principal Place of Business 12070 SE 84th Ave Suite, Apt. #, etc.		3. Mailing Address Same AS Suite, Apt. #, etc.	
City & State Belleview, FL		City & State Business	
Zip 34420		Country U.S.A.	
4. FEI Number 143127593		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BRANTLEY, JENNA E 1532 E SILVER SPRINGS BLVD. STE. 2 OCALA, FL 34471		7. Name and Address of New Registered Agent Name: Jenna Brantley Street Address (P.O. Box Numbers Not Acceptable): 12070 SE 84th Ave City: Belleview State: FL Zip Code: 34420	
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: <i>Jenna Brantley</i> Jenna Brantley 5/2/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering)</small> DATE			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BRANTLEY, DARRELL L SR. 1532 E SILVER SPRINGS BLVD OCALA, FL 34471 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Darrell Brantley Sr 12070 SE 84th Ave Belleview FL 34420 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO NICHOLS, NEIL A SR. 1532 E SILVER SPRINGS BLVD STE. 2 OCALA, FL 34471 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	COO Nichols, Neil A Sr 12070 SE 84th Ave Belleview FL 34420 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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: <i>Jenna Brantley</i> Jenna Brantley		5/2/05 352-873-2000	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF BOARD OFFICER OR DIRECTOR</small>		<small>DATE Daytime Phone #</small>	