2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N50635

1. Entity Name BRADLEY PARK, INC.



FILED Jan 14, 2008 08:00 A Secretary of State

Principal Place of Business

44 EAST BRADLEY STREET MIRAMAR BEACH, FL 32550 Mailing Address

44 EAST BRADLEY ST. BOX 15

MIRAMAR BEACH, FL 32550

01092008 No Chg-NP

CR2E037 (4/06)

4. FEI Number Applied For 59-3199826 Not Applicable

5. Certificate of Status Desired Sa.75 Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ANDERSON, ROBERT J 44 EAST BRADLEY STREET #12

MIRAMAR BEACH, FL 32550

DO NOT WRITE IN THIS SPACE

	_				
	e named entity submits this statement for the pur stions of registered agent.	pose of changing its registered	office or r	egistered agent, or bo	oth, in the State of Florida. I am familiar with, and accep
SIGNATURE	Skanature, typed or printed name of registered agent and little if an	noticeble (NOTE: Begintered A	goot elanature	required when reinstating)	DATE
	Signature, typed or printed name or registered agent and title it ap	ppecable. (NOTE: Hegistered A	gent signature	required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2008	9. Election Campaign Financia Trust Fund Contribution.	ng 🗆	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIRECTO	ORS			<u> </u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ANDERSON, ROBERT J 44 E. BRADLEY ST. #12 MIRAMAR BEACH, FL 32550		000000784287 01/16/08-80046-030 61.25		
TITLE Name Street address City-St-Zip	T GOODSON, PERRY F 44 E BRADLEY ST #14 MIRAMAR BEACH, FL 32550			g a	
TITLE NAME STRÆET ADDRESS CITY-ST-ZIP	VD BARFIELD, AUBURN 2809 EBENEZER RD ELLAVILLE, GA 31806			DO	NOT WRITE
ITLE MAME STREET ADDRESS CITY-ST-ZIP	VD MCMURRAY, GEORGE R 1911 N. CHEROKEE AVE. DOTHAN, AL 36303		IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S BARFIELD, HARRIET 2569 EBENEZER RD ELLAVILLE, GA 31806			···	_
TITLE NAME STREET ADDRESS CITY-ST-ZIP					

12. Thereby 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if