

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000052262

**FILED**  
**Feb 10, 2006**  
**Secretary of State**

**Entity Name:** JULIAN BRYAN & ASSOCIATES, INC.

**Current Principal Place of Business:**

851 SW 7TH STREET  
BOCA RATON, FL 33486

**New Principal Place of Business:**

1700 NW ARCADIA WAY  
BOCA RATON, FL 33432

**Current Mailing Address:**

PO BOX 810144  
BOCA RATON, FL 334810144

**New Mailing Address:**

**FEI Number:** 65-0992786      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BRYAN, JULIAN T IV  
PO BOX 810144  
BOCA RATON, FL 33481      US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD      ( ) Delete  
Name: BRYAN, JULIAN T III  
Address: 300 NE 25TH ST.  
City-St-Zip: BOCA RATON, FL 33431

Title: VD      ( ) Delete  
Name: BRYAN, JULIAN T IV  
Address: 767 SW 7TH ST.  
City-St-Zip: BOCA RATON, FL 33486

Title: S      ( ) Delete  
Name: PASCALE, BRYAN  
Address: 767 7TH ST.  
City-St-Zip: BOCA RATON, FL 33486

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: PASCALE BRYAN

S

02/10/2006

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date