

**2004 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 09, 2004 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000061895**

1. Entity Name  
**BRADSHAW-MONTGOMERY BLDG., INC.**



Principal Place of Business  
**1388 COUNTRY CLUB ROAD  
GULF BREEZE, FL 32561**

Mailing Address  
**1388 COUNTRY CLUB ROAD  
GULF BREEZE, FL 32561**



01062004 No Chg-P CR2E034 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FCI Number <b>59-3656897</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

**6. Name and Address of Current Registered Agent**

**MONTGOMERY, ROBERT A  
1388 COUNTRY CLUB ROAD  
GULF BREEZE, FL 32561**

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when renouncing)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

U00000108182

04/09/04-80045-009 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	D
NAME	MONTGOMERY, ROBERT B
STREET ADDRESS	1388 COUNTRY CLUB ROAD
CITY- ST- ZIP	GULF BREEZE, FL 32561
TITLE	D
NAME	BRADSHAW, HENRY A
STREET ADDRESS	1388 COUNTRY CLUB ROAD
CITY- ST- ZIP	GULF BREEZE, FL 32561
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

**DO NOT WRITE  
IN THIS SPACE**

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 607, 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:**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/10 Phone #

*Robert Montgomery* **Robert Montgomery** 4/2/04 8509329228