

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 12, 2005 8:00 am
Secretary of State

04-18-2005 90273 048 ***150.00

DOCUMENT # P01000082467

1. Entity Name
BRODAHL ENTERPRISES, INC.



Principal Place of Business
**965 SPRING GARDEN ST
ALTAMONTE SPRINGS, FL 32701**

Mailing Address
**965 SPRING GARDEN ST
ALTAMONTE SPRINGS, FL 32701**

66016746



01192005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3739357

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

EKDAHL, ROBERT A
~~2500 RIDGEWIND WAY~~ **4006 SW. 25th place**
~~WINDERMERE, FL 34786~~ **Cape Coral, Florida**
33914

**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 reappointing)

DATE

**FILE NOW!! FEE IS \$150.00.
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

10. OFFICERS AND DIRECTORS

TITLE **P**
NAME **EKDAHL, ROBERT A**
STREET ADDRESS ~~2500 RIDGEWIND WAY~~ **4006 SW. 25th place**
CITY-ST-ZIP ~~WINDERMERE, FL 34786~~ **Cape Coral, Florida**
33914

TITLE **V**
NAME **EKDAHL, PAUL E**
STREET ADDRESS **965 SPRING GARDEN STREET**
CITY-ST-ZIP **ALTAMONTE SPRINGS, FL 32701**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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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)(i), 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:

Paul E. Ekdahl **Paul E. Ekdahl** 5/07/05 407-3313398

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #