

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 11, 2005 8:00 am
Secretary of State

08-11-2005 90004 036 ***550.00

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07312005 Chg-P CR2E034 (10/03)

DOCUMENT # P01000114674 1. Entity Name BRANNEN CONSTRUCTION, INC.																																																			
Principal Place of Business 4930 DEERWOOD AVENUE YOUNGSTOWN, FL 32466		Mailing Address POST OFFICE BOX 36332 PANAMA CITY, FL 32412																																																	
2. Principal Place of Business 3416 High Cliff Rd Suite, Apt. #, etc.		3. Mailing Address P.O. Box 1077 Suite, Apt. #, etc.																																																	
City & State Southport, FL Zip 32409		City & State Lynn Haven, FL Zip 32444																																																	
Country USA		Country USA																																																	
4. FEI Number 26-0004290		Applied For <input type="checkbox"/> Not Applicable																																																	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required																																																	
6. Name and Address of Current Registered Agent BRANNEN, TONY A JR. 4930 DEERWOOD AVENUE YOUNGSTOWN, FL 32466		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																	
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: <u><i>Ta AR</i></u> (President/Director) 7/31/05 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																			
FILE NOW!!! FEE IS \$550.00 Due by September 7, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees																																																	
10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> D BRANNEN, TONY A JR. 4930 DEERWOOD AVENUE YOUNGSTOWN, FL 32466 </td> <td style="width: 10%; text-align: right;"> <input type="checkbox"/> Delete </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANNEN, TONY A JR. 4930 DEERWOOD AVENUE YOUNGSTOWN, FL 32466	<input type="checkbox"/> Delete																						11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 30%;">TITLE NAME STREET ADDRESS CITY-ST-ZIP</td> <td style="width: 70%;"> D / President Tony A Brannen Jr. 3416 High Cliff Rd Southport, FL 32409 </td> <td style="width: 10%; text-align: right;"> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition </td> </tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> <tr><td colspan="3"> </td></tr> </table>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D / President Tony A Brannen Jr. 3416 High Cliff Rd Southport, FL 32409	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition																					
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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: <u><i>Ta AR</i></u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<div style="display: flex; justify-content: space-between;"> <u>7/31/05</u> <u>850-258-1347</u> </div> <small>Date Daytime Phone #</small>																																																	