

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 23, 2003 8:00 am
Secretary of State

04-23-2003 90292 043 ***150.00

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DOCUMENT # P02000016471



1. Entity Name
BROADLEY INVESTMENTS INC.

Principal Place of Business
545 DELANEY AVENUE
BUILDING 8
ORLANDO FL 32801

Mailing Address
545 DELANEY AVENUE
BUILDING 8
ORLANDO FL 32801



2. Principal Place of Business
3751 ASTER DRIVE
Suite, Apt. #, etc.

3. Mailing Address
3751 ASTER DRIVE
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State
SARASOTA, FL

City & State
SARASOTA, FL

4. FEI Number
11-3645567

Applied For
Not Applicable

Zip
34233

Country
USA

Zip
34233

Country
USA

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HARWOOD, CHRIS J
545 DELANEY AVENUE
BUILDING 8
ORLANDO FL 32801

Name LAURA L. BROADLEY
Street Address (P.O. Box Number is Not Acceptable)
3751 ASTER DRIVE
City SARASOTA FL Zip Code 34233

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 L. Broadley LAURA L. BROADLEY PRESIDENT 4/21/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROADLEY, LAURA L 545 DELANEY AVENUE, BUILDING 8 ORLANDO FL 32801	<input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BROADLEY, LAURA L 3751 ASTER DRIVE SARASOTA, FL, 34233	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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: L. Broadley LAURA L. BROADLEY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date 4/21/03 Daytime Phone # (941) 924 6633

CR2E034 (10/02)