

**2005 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 28, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P03000082814

1. Entity Name  
BRAD BYRNS CARPENTRY, INC.



Principal Place of Business  
836 FAIRVIEW AVE.  
ALTAMONTE SPRINGS, FL 32701

Mailing Address  
836 FAIRVIEW AVE.  
ALTAMONTE SPRINGS, FL 32701



**DO NOT WRITE IN THIS SPACE**

01142005 No Chg-P CR2E034 (10/03)

4. FEI Number 32-0084735	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

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

BYRNS, ANDREW BRADLEY  
351 LONE HILL DRIVE #104  
ALTAMONTE SPRINGS, FL 32701

**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 Andrew Bradley Byrns ANDREW BRADLEY BYRNS APRIL 26th 2005  
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, 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	BYRNS, ANDREW BRADLEY
STREET ADDRESS	351 LONE HILL DRIVE #104
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32701

TITLE	VT
NAME	BAKER, ROGER JOHN
STREET ADDRESS	351 LONE HILL DRIVE #104
CITY-ST-ZIP	ALTAMONTE SPRINGS, FL 32701

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/28/05-80076-003 150.00

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: Roger J. Baker ROGER J. BAKER 4/14/05 407-923-2323  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #