

**2007 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jul 27, 2007 8:00 am**  
**Secretary of State**

07-27-2007 90008 008 \*\*\*550.00

**DOCUMENT # P03000101444**

1. Entity Name  
**BRANDEBURG DEVELOPMENT GROUP, INC.**



Principal Place of Business <b>1300 CITIZENS BLVD          STE 110          LEESBURG, FL 34748</b>	Mailing Address <b>1300 CITIZENS BLVD          STE 110          LEESBURG, FL 34748</b>
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07172007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>75-3130956</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

6. Name and Address of Current Registered Agent

**BRANDEBURG, JOHN D  
 1300 W CITIZENS BLVD  
 LEESBURG, FL 34748**

**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: *John D. Brandenburg* 7/23/07  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$550.00  
 Due by September 14, 2007**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRANDEBURG, JOHN D 1300 W CITIZENS BLVD, SUITE 110 LEESBURG, FL 34748
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BRANDEBURG, ROSANNE 1300 CITIZENS BLVD, SUITE 110 LEESBURG, FL 34748
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 exemptions contained in Chapter 119, 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: *John D. Brandenburg* 7/23/07 (352)435-0500  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #  
**JOHN D. BRANDEBURG**