


# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 31, 2004 8:00 am**  
**Secretary of State**

08-31-2004 90003 035 \*\*\*158.75

<b>DOCUMENT # P03000121378</b> 1. Entity Name <b>THE BRYSON CORPORATION, INC.</b>					
Principal Place of Business <b>P.O. BOX 218 LAUREL, FL 34272 02</b>			Mailing Address <b>P.O. BOX 218 LAUREL, FL 34272 02</b>		
2. Principal Place of Business  Suite, Apt. #, etc.			3. Mailing Address  Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>APPLIED FOR</b>	
4. Name and Address of Current Registered Agent  <b>STEPHAN, MICHELE S ESQ 101 WEST VENICE AVENUE SUITE 8 VENICE, FL 34285</b>				7. Name and Address of New Registered Agent  Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11</b>		
TITLE	P	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYSON, ROGER		NAME		
STREET ADDRESS	P.O. BOX 218		STREET ADDRESS		
CITY-ST-ZIP	LAUREL, FL 34272		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYSON, CHRIS		NAME		
STREET ADDRESS	P.O. BOX 218		STREET ADDRESS		
CITY-ST-ZIP	LAUREL, FL 34272		CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYSON, ROGER		NAME		
STREET ADDRESS	P.O. BOX 218		STREET ADDRESS		
CITY-ST-ZIP	LAUREL, FL 34272		CITY-ST-ZIP		
TITLE	S	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BRYSON, CHRIS		NAME		
STREET ADDRESS	P.O. BOX 218		STREET ADDRESS		
CITY-ST-ZIP	LAUREL, FL 34272		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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.					
<b>SIGNATURE:</b> <i>Ch. Bryson</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			7-29-04 (941)650-4652 Date Time Phone		



ATTACHMENT 54071015  
# P03000121378

**MICHELE S. STEPHAN, CHARTERED**

Attorney and Counselor at Law

101 West Venice Avenue, Suite 8, Venice, Florida 34285  
(941) 488-8545 Office ♦ (941) 488-8544 Fax

August 25, 2004

Florida Department of State Division of Corporations  
Corporate Filings  
P.O. Box 6327  
Tallahassee, Florida 32314

Re: The Bryson Corporation, Inc.


Dear Sir or Madam:

Enclosed for filing please find the Annual Report for the above corporation along with the filing fee of \$150.00 plus \$8.75 for a certificate of status.

Thank you.

Very truly yours,

MICHELE S. STEPHAN, CHARTERED

  
Michele S. Stephan