2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134702

Entity Name: BRATTON AND BRATTON, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

2750 OLD ST. AUGUSTINE 105 SHARONWOOD DRIVE #R182 CRAWFORDVILLE, FL 32327

TALLAHASSEE, FL 32301

Current Mailing Address: New Mailing Address:

2750 OLD ST. AUGUSTINE RD. #R182 105 SHARONWOOD DRIVE TALLAHASSEE, FL 32301 CRAWFORDVILLE, FL 32327

FEI Number: 20-0403377 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRATTON, GREGORY
2750 OLD ST. AUGUSTINE #R182
TALLAHASSEE, FL 32301 US
BRATTON, GREGORY
105 SHARONWOOD DRIVE
CRAWFORDVILLE, FL 32327 US

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.

SIGNATURE: GREGORY BRATTON 04/30/2007

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition BRATTON, GREGORY D BRATTON, GREGORY D Name: Name: 2750 OLD ST. AUGUSTINE RD. #R182 Address: 105 SHARONWOOD DRIVE Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: CRAWFORDVILLE, FL 32327

Title: V () Delete Title: V (X) Change () Addition

 Name:
 BRATTON, FELICIA
 Name:
 BRATTON, FELICIA

 Address:
 2750 OLD ST. AUGUSTINE RD. #R182
 Address:
 105 SHARONWOOD DRIVE

 City-St-Zip:
 TALLAHASSEE, FL 32301
 City-St-Zip:
 CRAWFORDVILLE, FL 32327

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY BRATTON P 04/30/2007