2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Sep 30, 2004 8:00 am Secretary of State

DOCUMENT # P03000144019 1. Entity Name BRAN-CO INC. OF LAKE WALES									09-30-	2004 9001	2 022 **	*150.00	
Principal Place	of Business	i	Ма	Mailing Address									
3600 HIDDEN HAMMOCK RD LAKE WALES, FL 33898				3600 HIDDEN HAMMOCK RD LAKE WALES, FL 33898						5	40730	679	
<u> </u>													
2. Principal Place of Business				3. Mailing Address									
Suite, Apt. #, etc.				Suite, Apt. #, etc.				07022004	Chg-P	CR2E03	34 (10/03)		
City & State				City & State				4. FEI Numb 59-26	er 59600			oplied For ot Applicable	
Zip		Country	1	Zip	Coun	try			of Status Desired		8.75 Add	litional	
	6. Name	and Address of Current	Regis	tered Agent	<u> </u>			7. Name and	Address of New		ee Require gent		
BRANTLEY, JAMES D							Name						
3600 HIDD LAKE WAL	ÉN HAMN	MOCK RD			Street Address (P.O. Box Number is Not Acceptable)								
	·										1		
						City			***************************************	FL	Zip Cod		
	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_	Signature, typed	or printed name of registered agent.	and tide	if applicable. (NOT	E: Registere	d Agent signatu	re required	i when reinstating)		DATE	2 2 2	<u>। जन्म</u> न न	
FILE NOW!!! FEE IS \$150.00 Due by September 8, 2004 9. Election Carr Trust Fund C							\$5 .	.00 May Be ed to Fees	In accordance corporation di	with s. 607. d not receive	193(2)(b), the prior	F.S., the notice.	
10.		OFFICERS AND	DIREC		11.		מעם		CHANGES TO OF	FICERS AND			
TITLE NAME				☐ Delete	E i	PVPSTD Change Addition James D Brantley							
STREET ADDRESS CITY-ST-ZIP						EET ADDRESS '-ST-ZIP		500 Hidden Hammock Rd ake Wales FL 33898					
TITLE				☐ Delete	TITL				- -		☐ Change	Addition	
NAME STREET ADDRESS					nam Stre	et address						}	
CITY-ST-ZIP	•					-ST-ZIP							
TITLE NAME		_ •		☐ Delete	TITL NAM		_				Change	Addition	
STREET ADDRESS CITY-ST-ZIP		•				EET ADORESS '- St-ZIP							
TITLE -	2			Delete	TITL						☐ Change	☐ Addition	
NAME STREET ADDRES	Sec.			•		eet address							
CITY-SY-ZIP						/-ST-ZIP	<u> </u>						
NAME NAME	,			☐ Delete	TITL.						☐ Change	Addition	
STREE RESS						eet address (-ST-ZIP							
- TITLE				☐ Delete	TITL						☐ Change	☐ Addition	
NAME STREET ADDRESS					NAM STR	ae Eet address				έť:	1, 1,100		
CITY-ST-ZIP						/-ST-ZIP						r — ya gerdenden — mille a	
indicated indicated	on this repo	e information supplied with rt or supplemental report is	s true	and accurate and that	my signa	sture shall h	ave the	same legal effe	ct as if made unde	er oath; that I a	ım an officei	r or director	
		ne receiver or trustee emp achinent with an address,				ired by Cha	apter 60	7, Florida Statut	es; and that my na	ime appears ir	Block 10 o	r Block 11 if	
SIGNATURE: X James D. Brantley 49/27/04 x 865-676-499												76-4996	
l .		SMATURE AND TYPED OR	PRINTE	D NAME OF SIGNING OFFICER	R OR DIREC	TOR			Date	0	aytime Phone #		