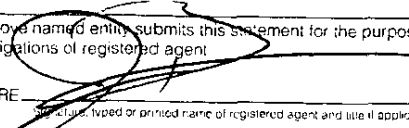
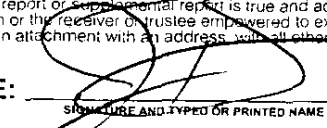


# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 30, 2007 8:00 am**  
**Secretary of State**

08-30-2007 90001 025 \*\*\*150.00

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |                                 |                                                                                                                                                                                         |                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------|
| <b>DOCUMENT # P03000155814</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                 |                                                                                                        |                                                                              |
| <b>1. Entity Name</b><br>JASON BRAWNER, INC.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 |                                                                                                                                                                                         |                                                                              |
| <b>Principal Place of Business</b><br>11242 ROUSE RUN CIRCLE<br>ORLANDO, FL 32817                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                 | <b>Mailing Address</b><br>11242 ROUSE RUN CIRCLE<br>ORLANDO, FL 32817                                                                                                                   |                                                                              |
| <b>2. Principal Place of Business - No P.O. Box #</b><br>126 Pinhurst Circle                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | <b>3. Mailing Address</b><br>126 Pinhurst Circle                                                                                                                                        |                                                                              |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | Suite, Apt. #, etc.                                                                                                                                                                     |                                                                              |
| <b>City &amp; State</b><br>Naples, FL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                 | <b>City &amp; State</b><br>Naples, FL                                                                                                                                                   |                                                                              |
| <b>Zip</b><br>34113                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                 | <b>Country</b><br>USA                                                                                                                                                                   |                                                                              |
| <b>4. FEI Number</b><br>20-0502611                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | <b>Applied For</b><br><input type="checkbox"/> Not Applicable                                                                                                                           |                                                                              |
| <b>5. Certificate of Status Desired</b> <input type="checkbox"/>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                 | <b>\$8.75 Additional Fee Required</b>                                                                                                                                                   |                                                                              |
| <b>6. Name and Address of Current Registered Agent</b><br>BRAWNER, JASON L<br>11242 ROUSE RUN CIRCLE<br>ORLANDO, FL 32817                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                 | <b>7. Name and Address of New Registered Agent</b><br>Name: Jason Brawner<br>Street Address (P.O. Box Number is Not Acceptable): 126 Pinhurst Circle<br>City: Naples FL Zip Code: 34113 |                                                                              |
| <b>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.</b><br>SIGNATURE:  DATE: 8/27/07                                                                                                                                                                                                                                                                                                 |                                 |                                                                                                                                                                                         |                                                                              |
| <b>FILE NOW!!! FEE IS \$150.00 Due by September 14, 2007</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |                                 | <b>9. Election Campaign Financing</b><br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees                                                                  |                                                                              |
| 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<br>NAME: BRAWNER, JASON L<br>STREET ADDRESS: 11242 ROUSE RUN CIRCLE<br>CITY, ST, ZIP: ORLANDO, FL 32817                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | <input type="checkbox"/> Delete | TITLE: P<br>NAME: Brawner, Jason L<br>STREET ADDRESS: 126 Pinhurst Circle<br>CITY, ST, ZIP: Naples, FL 34113                                                                            | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | <input type="checkbox"/> Delete | TITLE:<br>NAME:<br>STREET ADDRESS:<br>CITY, ST, ZIP:                                                                                                                                    | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| <b>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.</b> |                                 |                                                                                                                                                                                         |                                                                              |
| <b>SIGNATURE:</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |                                 | Date: 8/27/07      863-528-5909                                                                                                                                                         |                                                                              |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                 | Date      Daytime Phone #                                                                                                                                                               |                                                                              |

40130705

