2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000004040

Name:

Address:

City-St-Zip:

FILED Jan 06, 2006 Secretary of State

Entity Name: BRADON ENTERPRISES INC. **Current Principal Place of Business: New Principal Place of Business:** 8526 SE 12TH CT OCALA, FL 34480 **Current Mailing Address: New Mailing Address:** 8526 SE 12TH CT OCALA, FL 34480 FEI Number: 87-0716375 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: SHELLI, LOUGHREY T SHELLI, LOUGHREY T 8526 SÉ 12TH COURT 4401 SW 7TH AVE. ROAD OCALA, FL 34474 OCALA, FL 34480 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: SHELLI LOUGHREY 01/06/2006 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition LOUGHREY, BRADFORD M Name: Name: 8526 SE 12TH CT Address: Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: Title: VΡ Title: () Delete () Change () Addition Name: LOWER, BRANDON Name: 8526 SE 12TH CT Address: Address: OCALA, FL 34480 City-St-Zip: City-St-Zip: Title: Title: SEC () Delete () Change () Addition LOUGHREY, SHELLI T Name: Name: 8526 SE 12TH CT Address: Address: City-St-Zip: OCALA, FL 34480 City-St-Zip: Title: () Delete Title: **TRES** () Change (X) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

LOUGHREY, SHELLI T

8526 SE 12TH COURT

OCALA, FL 34480

SIGNATURE: SHELLI LOUGHREY SEC 01/06/2006