2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000012974

Title:

Name: Address:

City-St-Zip:

SEC

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HELWIG, JACK W IV

PALATKA, FL 32177

2007 LAUREL STREET

Entity Name: BRAINIAC ENTERPRISES, INC.

FILED May 10, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 1073 MEADOWOOD POINTE ROAD LAKELAND, FL 33811 **Current Mailing Address: New Mailing Address:** P.O. BOX 7759 LAKELAND, FL 33807-775 US FEI Number: 76-0749082 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: CULPEPPER, ROSSIE J III 1073 MEADOWOOD POINTE ROAD LAKELAND, FL 33811 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: Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CULPEPPER, ROSSIE J III Name: Name: 1073 MEADOWOOD POINTE ROAD Address: Address: City-St-Zip: LAKELAND, FL 33811 US City-St-Zip: Title: Title: () Delete (X) Change () Addition CULPEPPER, ALICIA M Name: Name: ALBRITTON, WILLIAM R 1073 MEADOWOOD POINTE ROAD 3424 OLD BARTOW RD Address: Address: LAKELAND, FL 33811 LAKE WALES, FL 33859 US City-St-Zip: City-St-Zip: Title: Title: (X) Change () Addition TRFA () Delete TRFA CULPEPPER, ROSSIE J III ALBRITTON, TONI Name: Name: 1073 MEADOWOOD POINTE ROAD 3424 OLD BARTOW RD Address: Address: City-St-Zip: LAKELAND, FL 33811 US City-St-Zip: LAKE WALES, FL 33859 US

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

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: ROSSIE J CULPEPPER III 05/10/2005

() Change () Addition