

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Aug 09, 2006 8:00 am**  
**Secretary of State**

08-09-2006 90014 028 \*\*\*158.75

DOCUMENT # P04000027034

1. Entity Name

BRUMLEY INVESTMENTS INC.



Principal Place of Business  
9969 HECKSHER DR.  
JACKSONVILLE FL 32226

Mailing Address  
9969 HECKSHER DR.  
JACKSONVILLE FL 32226



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E034 (4/06)

4. FEI Number 03-0537872

Applied For  
Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

BRUMLEY, JAMES C III  
2140 FOREST HOLLOW WAY  
JACKSONVILLE FL 32259

Name Brumley James C III

Street Address (P.O. Box Number is Not Acceptable)

9969 Hecksher Dr.

City Jacksonville

FL

Zip Code 32226

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

*James C Brumley III*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

8/3/06

DATE

**FILE NOW!!! FEE IS \$550.00**  
**DUE BY September 6, 2006**

**Make Check Payable to Florida Department of State**

S.607.193(2)(b), F.S., allows for the waiver of the \$400.00 late fee. By checking this box, the corporation certifies it did not receive prior notice. Fee to file is \$150.00. ☒

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P  
NAME BRUMLEY, JAMES C III  
STREET ADDRESS 2140 FOREST HOLLOW WAY  
CITY-ST-ZIP JACKSONVILLE FL 32259 ☐ Delete

TITLE VP  
NAME BRUMLEY, LESLIE M  
STREET ADDRESS 2140 FOREST HOLLOW WAY  
CITY-ST-ZIP JACKSONVILLE FL 32259 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE P  
NAME Brumley James C III  
STREET ADDRESS 9969 Hecksher Dr.  
CITY-ST-ZIP Jacksonville FL 32226 ☒ Change ☐ Addition

TITLE VP  
NAME Brumley Leslie M  
STREET ADDRESS 9969 Hecksher Dr.  
CITY-ST-ZIP Jacksonville FL 32226 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

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.

SIGNATURE:

*James C Brumley III*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/3/06

904-251-3675

ATTACHMENT

20052105

#P04000027034

8/3/06

To whom it may concern, the only  
notice I received was a notice  
of intent to dissolve. Mailed in the  
card to get the form. any question  
you can contact me Jim Brunley @  
904-251-3675

Thanks

JCB/ET