

# 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2008 FEB -8 PM 4:46

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01312008 Chg-P CR2E034 (12/06)

<b>DOCUMENT # P04000078304</b> 1. Entity Name <b>BRANDON CAPITAL INVESTMENTS OF FLORIDA, INC.</b>					
Principal Place of Business <b>1205 ADMIRALTY BLVD ROCKLEDGE, FL 33295-5</b>			Mailing Address <b>1205 ADMIRALTY BLVD ROCKLEDGE, FL 32955</b>		
2. Principal Place of Business - No P.O. Box # <b>2282 N US HIGHWAY 1</b>		3. Mailing Address <b>2282 N. US HIGHWAY 1</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>FT. PIERCE, FLORIDA</b>		City & State <b>FT. PIERCE, FLORIDA</b>		4. FEI Number <b>33-1091858</b>	
Zip <b>34946</b> Country <b>USA</b>		Zip <b>34946</b> Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>MOSLEY, CURTIS R 1221 E. NEW HAVEN AVE. MELBOURNE, FL 32901</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Amended AR is \$61.25</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <b>HESSEE, CRAIG S 1205 ADMIRALTY BLVD ROCKLEDGE, FL 32955</b> <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D <b>HESSEE, MARK S. 2282 N US HIGHWAY 1 FT. PIERCE, FL <del>32940</del> 34946</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>V FLAIA, FRANK S. 2282 N. U.S. HIGHWAY 1 FORT PIERCE, FL 34946</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ST HESSEE, CLAUDIA S. 2282 N. U.S. HIGHWAY 1 FORT PIERCE, FL 34946</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>500118407955 02/20/08--01005--002 **61.25</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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.					
<div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 40%;"> <b>SIGNATURE:</b> _____  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small> </div> <div style="width: 40%; text-align: center;"> <b>MARK S. HESSEE</b>  <b>2/4/08</b> </div> <div style="width: 20%; text-align: right;"> <b>(772) 460-3833</b>  <small>Date Daytime Phone #</small> </div> </div>					

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