## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000104317

Entity Name: THE SHELDON BRYAN COMPANIES, INC.

FILED Mar 13, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:				
1 INDEPENDENT DR SUITE 3201 JACKSONVILLE, FL 32202								
Current Mailing Address:			Nev	New Mailing Address:				
1 INDEPENDENT DR SUITE 3201 JACKSONVILLE, FL 32202								
FEI Number: 20-1382401 FEI Number Applied For ( ) FEI Number			FEI Number	mber Not Applicable ( ) Certificate of			te of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
MILAM HOWARD NICANDRI DEES & GILLAM, P.A.  14 EAST BAY STREET  JACKSONVILLE, FL 32202 US								
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	
Election Cam	paign Financing	Trust Fund Contribution ( ).						
OFFICERS AND DIRECTORS:			AD	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	BRYAN, SHELD	T DRIVE, SUITE 3201				()Change(	) Addition	
Title: Name: Address: City-St-Zip:	MORAFATES, A	T DRIVE, SUITE 3201		ne:	KEEN, BRIAN 1 INDEPEND	(X) Change( N ENT DRIVE, S LLE, FL 3220	SUITE 3201	
Title: Name: Address: City-St-Zip:	BALL, BUTLER	Delete IT DRIVE, SUITE 3201 I, FL 32202 US				( ) Change(	) Addition	
Title: Name: Address: City-St-Zip:	FALLOON, NAN	T DRIVE, SUITE 3201				() Change(	) Addition	
Title: Name: Address: City-St-Zip:	BRYAN, CARTÉ	T DRIVE, SUITE 3201			CARTER, BR 1 INDEPEND	(X) Change( RYAN B. DENT DRIVE, LLE, FL 3220	SUITE 3201	
Title: Name: Address: City-St-Zip:	AS () HOWARD, G. AI 14 EAST BAY S JACKSONVILLE	TREET				() Change(	) Addition	
I hereby certify that the information supplied with this filing does not qualify 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.								

SIGNATURE: G. ALAN HOWARD AS 03/13/2008