

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000006062

FILED
Apr 28, 2011
Secretary of State

Entity Name: BRAISHFIELD ASSOCIATES, INC.

Current Principal Place of Business:

2966 COMMERCE PARK DRIVE
SUITE 350
ORLANDO, FL 32819

New Principal Place of Business:

Current Mailing Address:

3101 W DR MARTIN LUTHER KING JR BLVD.
SUITE 400
TAMPA, FL 33607

New Mailing Address:

2966 COMMERCE PARK DRIVE
SUITE 350
ORLANDO, FL 32819

FEI Number: 20-2147367

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: DP
Name: RIORDAN, MICHAEL J
Address: 2150 S ANDREWS AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33316

Title: V
Name: WALKER, CORY T
Address: 220 S RIDGEWOOD AVENUE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: T
Name: FAILLA, JR, JOSEPH S
Address: 220 S RIDGEWOOD AVE
City-St-Zip: DAYTONA BEACH, FL 32114

Title: VS
Name: GRAMMIG, LAUREL L
Address: 3101 W DR MARTIN LUTHER KING, SUITE 400
City-St-Zip: TAMPA, FL 33607

Title: VAS
Name: DONEGAN, JR, THOMAS M
Address: 3101 W DR MARTIN LUTHER KING, SUITE 400
City-St-Zip: TAMPA, FL 33607

I hereby 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 all other like empowered.

SIGNATURE: LAUREL L GRAMMIG

VS

04/28/2011

Electronic Signature of Signing Officer or Director

Date