2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE PAT Brayton
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Jan 22, 2007 8:00 am Secretary of State

352/796-4840 Daytime Phone #

Date

| DOCUMENT # P05000018606 1. Entity Name JAMES L. BRAYTON, INC. | | | | | 01-22-2007 90108 032 ***150.00 | | | | | |
|--|---|--|----------------------|--|---|---|---------------------------------------|-----------------------|------------------------------|--|
| Principal Plac | e of Business | 1 | 1 | | | | | | | |
| 205 ALPINE CIRCLE BROOKSVILLE, FL 34601 | | Mailing Address 205 ALPINE CIRCLE BROOKSVILLE, FL 34601 | | | | | | | | |
| | | | | | | | | | | |
| 2. Principal P | Place of Business - No P.O. Box # | 3. Mailing Address | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | | 01102007 | Chg-P | CR2E034 (| 12/06) | | |
| City & Stat | 8 | City & State | | | 4. FEI Number | | | | plied For | |
| Zip Country | | Zip Coun | | itry | 76-0777613 Not Applicable 5. Certificate of Status Desired \$8.75 Additional | | | | | |
| S. Name and Address of Current | | Paralytered Agent | Perdistare/i Agent | | | | Fee | Require | d | |
| C. Name and Address of Current Registered Agent | | | | 7. Name and Address of New Registered Agent Name | | | | | | |
| BRAYTON, JUDY 205 ALPINE CIRCLE | | | | Street Address (P.O. Box Number is Not Acceptable) | | | | | | |
| BROOKSVILLE, FL 34601 | | | | | | | | | | |
| | | | | City | | | FL | Zip Cod | е | |
| 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 | | | | | | | | | and accept | |
| the obligations of registered agent. | | | | | | | | | | |
| SIGNATURE. | Signature, typed or printed name of registered agent | | | | | | | | | |
| | Signature, typed or printed name of registered agent | and title if applicable. (NOT) | :: Hegistere | d Agent signature require | d when reinstating) | | DATE | | | |
| | E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550. | 9. Election Campai Trust Fund Cont | | | .00 May Be led to Fees | | | | | |
| 10. | OFFICERS AND | DIRECTORS | 11. | | ADDITIONS/C | HANGES TO OFFI | CERS AND DIF | ECTOR: | S IN 11 | |
| TITLE NAME | D DAYTON IAMES | ☐ Delete | TITU | | Đ, | | | Change | ■XAddition | |
| STREET ADDRESS | BRAYTON, JAMES NAI 205 ALPINE CIRCLE STE | | | ET ADDRESS | Webb, Dean | | | | | |
| CITY-ST-ZIP | BROOKSVILLE, FL 34601 | | | 8290 Normlee Rd Weeki Wachee, FL 34601 | | | | | | |
| TITLE | D DAYTON DAT | ☐ Delete | TITL | | MEEVI M | achee,r | т эф | Change | Addition | |
| NAME STREET ADDRESS | BRAYTON, PAT 205 ALPINE CIRCLE SIR | | | E ADDRESS | | | | | | |
| CITY-ST-ZIP | 1 | | | -ST-ZIP | | | | | | |
| TITLE | D | ☐ Delete | TITLI | | | | | Change | Addition | |
| NAME STREET ADDRESS | BRAYTON, JUDY 205 ALPINE CIRCLE | | NAM STRE | ET ADDRESS | | | | | | |
| CITY-ST-ZIP | BROOKSVILLE, FL 34601 | | 1 | -ST-ZIP | | | | | | |
| TITLE | | ☐ Delete | TITL | E | · · · · · · · · · · · · · · · · · · · | | | Change | ☐ Addition | |
| NAME STREET ADDRESS | | | NAM | • | | | | | | |
| CITY-ST-ZIP | | | | ET ADDRESS -ST-ZIP | | | | | | |
| TITLE | | ☐ Delete | THTL | E | | | | Change | Addition | |
| NAME | | | NAM | | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS - ST-ZIP | | | | | | |
| TITLE | | ☐ Delete | TITLE | | | | | Change | Addition | |
| NAME | | | NAM | - | | | _ | - | | |
| STREET ADDRESS CITY-ST-ZIP | | | | ET ADDRESS -SF-ZIP | | | | | | |
| | L | h this filing does not qualify fo | | | d in Chapter 119 | Florida Statutes. I | further certify the | nat the in | nformation | |
| indicatéd of the co | certify that the information supplied wit I on this report or supplemental report i reporation or the receiver or trustee emp | s true and accurate and that r powered to execute this report with all other like empowered. | ny signa as requi | ture shall have the ired by Chapter 60 | same legal effect 7, Florida Statutes | as if made under of and that my name | eath; that I am a e appears in Blo | n officer ock 10 o | or director r Block 11 if | |