

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044926

FILED  
Jan 31, 2007  
Secretary of State

Entity Name: BRADENTON RESEARCH CENTER, INC.

## Current Principal Place of Business:

3924 9TH AVE. WEST  
BRADENTON, FL 34205 US

## New Principal Place of Business:

## Current Mailing Address:

3924 9TH AVE. WEST  
BRADENTON, FL 34205 US

## New Mailing Address:

FEI Number: 16-1720183      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BLALOCK, WALTERS, HELD & JOHNSON, P.A.  
802 11TH STREET WEST  
BRADENTON, FL 34205 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: MCELVEEN, CAROLYN B  
Address: 3915 8TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: P ( ) Delete  
Name: MCELVEEN, CAROLYN B  
Address: 3915 8TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: V (X) Delete  
Name: MCELVEEN, CAROLYN B  
Address: 3915 8TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: S (X) Delete  
Name: MCELVEEN, CAROLYN B  
Address: 3915 8TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: T (X) Delete  
Name: MCELVEEN, CAROLYN B  
Address: 3915 8TH AVENUE WEST  
City-St-Zip: BRADENTON, FL 34205 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST (X) Change ( ) Addition  
Name: MCELVEEN, CAROLYN B  
Address: 3924 9TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: V (X) Change ( ) Addition  
Name: MCELVEEN, W. ALVIN M.D.  
Address: 3924 9TH AVE. WEST  
City-St-Zip: BRADENTON, FL 34205 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: CAROLYN B. MCELVEEN

DPST

01/31/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date