2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000044926

Entity Name: BRADENTON RESEARCH CENTER, INC.

FILED Jan 31, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 3924 9TH AVE. WEST BRADENTON, FL 34205 US **Current Mailing Address: New Mailing Address:** 3924 9TH AVE. WEST BRADENTON, FL 34205 US FEI Number: 16-1720183 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BLALOCK, WALTERS, HELD & JOHNSON, P.A. 802 11TH STREET WEST BRADENTON, FL 34205 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 Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: DPST (X) Change () Addition MCELVEEN, CAROLYN B Name: Name: MCELVEEN, CAROLYN B 3915 8TH AVENUE WEST 3924 9TH AVE. WEST Address: Address: City-St-Zip: BRADENTON, FL 34205 US City-St-Zip: BRADENTON, FL 34205 US Title: Title: () Delete (X) Change () Addition MCELVEEN, W. ALVIN M.D. Name: MCELVEEN, CAROLYN B Name: 3924 9TH AVE. WEST 3915 8TH AVENUE WEST Address: Address: BRADENTON, FL 34205 US City-St-Zip: BRADENTON, FL 34205 US City-St-Zip: Title: (X) Delete Title: () Change () Addition MCELVEEN, CAROLYN B Name: Name: 3915 8TH AVENUE WEST Address: Address: BRADENTON, FL 34205 US City-St-Zip: City-St-Zip: Title: (X) Delete Title: () Change () Addition MCELVEEN, CAROLYN B Name: Name: Address: 3915 8TH AVENUE WEST Address: City-St-Zip: BRADENTON, FL 34205 US City-St-Zip: Title: Title: (X) Delete () Change () Addition MCELVEEN, CAROLYN B Name: Name: 3915 8TH AVENUE WEST Address: Address: City-St-Zip: BRADENTON, FL 34205 US 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