

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 09, 2006 8:00 am
Secretary of State

03-09-2006 90163 026 ***150.00

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1. Entity Name
BRATTLOF ENTERPRISES, INC.



Principal Place of Business
**2413 WELLS LANE
MCKINNEY, TX 75070**

Mailing Address
**2413 WELLS LANE
MCKINNEY, TX 75070**

40041000

2. Principal Place of Business
770 4th Avenue N
Suite, Apt. #, etc.

3. Mailing Address
770 4th Avenue N
Suite, Apt. #, etc.



02222006 Chg-P CR2E034 (11/05)

City & State
St. Petersburg, FL
Zip
33701
Country
USA

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St. Petersburg, FL
Zip
33701
Country
USA

4. FEI Number
20-3084769
Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**MCATEE, CAROL
5401 CENTRAL AVE
ST PETERSBURG, FL 33710**

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL Zip Code

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 the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PS
BRATTLOF, NADALIE
2413 WELLS LANE
MCKINNEY, TX 75070** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VT
BRATTLOF, CAREY
2413 WELLS LANE
MCKINNEY, TX 75070** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**770 4th Avenue N
St. Petersburg, FL 33701** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**770 4th Avenue N
St. Petersburg, FL 33701** ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Carey Brattlof* **Carey Brattlof, V.P.** **2-28-06** **727-823-1761**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #