

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094422

FILED  
Apr 11, 2009  
Secretary of State

Entity Name: GILMORE-BRADY, INCORPORATED

## Current Principal Place of Business:

530 STATE ROAD 13 NORTH  
SUITE 5  
FRUIT COVE, FL 32259 US

## New Principal Place of Business:

## Current Mailing Address:

2148 OSPREY POINT DRIVE WEST  
JACKSONVILLE, FL 32224 US

## New Mailing Address:

142 WORTHINGTON PARKWAY  
ST. JOHNS, FL 32259 US

FEI Number: 56-2521391

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GILMORE, DAVID L  
2148 OSPREY POINT DRIVE WEST  
JACKSONVILLE, FL 32224 US

## Name and Address of New Registered Agent:

GILMORE, DAVID L  
142 WORTHINGTON PARKWAY  
ST JOHNS, FL 32259 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:

04/11/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: ST ( ) Delete  
Name: GILMORE, DAVID L  
Address: 2148 OSPREY POINT DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32224 US

Title: P ( ) Delete  
Name: GILMORE, KATHLEEN B  
Address: 2148 OPSREY POINT DRIVE WEST  
City-St-Zip: JACKSONVILLE, FL 32224 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change ( ) Addition  
Name: GILMORE, DAVID L  
Address: 142 WORTHINGTON PARKWAY  
City-St-Zip: ST. JOHNS, FL 32259 US

Title: P (X) Change ( ) Addition  
Name: GILMORE, KATHLEEN B  
Address: 142 WORTHINGTON PARKWAY  
City-St-Zip: ST JOHNS, FL 32259 US

I hereby certify that the information supplied with this filing does not qualify 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: DAVID GILMORE

ST

04/11/2009

Electronic Signature of Signing Officer or Director

Date