

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000035907

FILED
Aug 29, 2008
Secretary of State

Entity Name: BMC- BROOKS MCCULLOUGH CORPORATION

Current Principal Place of Business:

2404 NORTH BAY STREET EAST
TAMPA, FL 33610 US

New Principal Place of Business:

2404 E NORTH BAY STREET
TAMPA, FL 33610 US

Current Mailing Address:

2404 NORTH BAY STREET EAST
TAMPA, FL 33610 US

New Mailing Address:

2404 E NORTH BAY STREET
TAMPA, FL 33610 US

FEI Number: 20-4511885

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD
SUITE A-100
TAMPA, FL 336123425 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MCCULLOUGH, COISGE
Address: 2404 NORTH BAY STREET EAST
City-St-Zip: TAMPA, FL 33610 US

Title: S () Delete
Name: MCCULLOUGH, COISGE
Address: 2404 NORTH BAY STREET EAST
City-St-Zip: TAMPA, FL 33610 US

Title: T () Delete
Name: WHITE, ASHLEY
Address: RAINTREE RD
City-St-Zip: TAMPA, FL

Title: BM () Delete
Name: MCCULLOUGH, DEBORAH
Address: 1701 E FERN STREET
City-St-Zip: TAMPA, FL 33610

Title: DM () Delete
Name: COURTNEY, JOHN
Address: NOEL STREET
City-St-Zip: TAMPA, FL

Title: COO () Delete
Name: GODWIN, JEVONTA
Address: 2404 E NORTH BAY STREET
City-St-Zip: TAMPA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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 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: COISGE MCCULLOUGH

P

08/29/2008

Electronic Signature of Signing Officer or Director

Date