2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000061070

Entity Name: BRUCE, EDENFIELD & WHIDDEN INC.

FILED Mar 19, 2011 Secretary of State

Current Principal Place of Business: New Principal Place of Business	Current Principal Place of Business:	New Principal Place of Business
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711 N PARK ROAD

PLANT CITY, FL 33563 US

Current Mailing Address: New Mailing Address:

P.O. BOX 4170

PLANT CITY, FL 33563 US

FEI Number: 56-2589633 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BRUCE, TONI ANN 711 N PARK ROAD

PLANT CITY, FL 33563 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

OFFICERS AND DIRECTORS:

Title: P/D

Name: BRUCE, HENRY Address: P.O. BOX 4193

City-St-Zip: PLANT CITY, FL 33563 US

Title: VP/D

Name: EDENFIELD, KEVIN
Address: 3505 NESMITH ROAD
City-St-Zip: PLANT CITY, FL 33566 US

Title: T/D

Name: EDENFIELD, SHARON
Address: 3505 NESMITH ROAD
City-St-Zip: PLANT CITY, FL 33566 US

Title: S/D

 Name:
 WHIDDEN, KARLENE

 Address:
 P.O. BOX 4170

 City-St-Zip:
 PLANT CITY, FL 33563 US

Title: O/D

Name: BRUCE, TONI ANN Address: P.O. BOX 4193

City-St-Zip: PLANT CITY, FL 33563 US

I hereby 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 all other like empowered.

SIGNATURE: KARLENE WHIDDEN S/D 03/19/2011