

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P22600

FILED
Jan 31, 2005
Secretary of State

Entity Name: BRADY & HORNE COMPANY

Current Principal Place of Business:

25 COLLEGE PARK COVE
P.O. BOX 1622
JACKSON, TN 38302

New Principal Place of Business:

Current Mailing Address:

25 COLLEGE PARK COVE
P.O. BOX 1622
JACKSON, TN 38302 US

New Mailing Address:

FEI Number: 62-0611564 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 S. PINE ISLAND ROAD
PLANTATION, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: GREEN, DAVID
Address: 25 COLLEGE PARK COVE
City-St-Zip: JACKSON, TN 38305

Title: PD () Delete
Name: RAINES, W. CHRIS
Address: 25 COLLEGE PARK COVE
City-St-Zip: JACKSON, TN 38305

Title: ST () Delete
Name: MCDONALD, TAMMI A
Address: 25 COLLEGE PARK COVE
City-St-Zip: JACKSON, TN

Title: D () Delete
Name: BECKER, LARRY
Address: 50 SECURITY DRIVE
City-St-Zip: JACKSON, TN 38305

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: TAMMI MCDONALD

ST

01/31/2005

Electronic Signature of Signing Officer or Director

_____ Date