

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 13, 2001 8:00 am
Secretary of State
03-13-2001 90319 025 ***150.00

DOCUMENT # P93000004206

1. Entity Name

BRAY INTERNATIONAL PROFESSIONAL SERVICES, INC.

Principal Place of Business

**402 APPELROUTH LANE
KEY WEST FL 33040
US**

Mailing Address

**C/O MICHAEL L. BROWNING
402 APPELROUTH LANE
KEY WEST FL 33040
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0406546

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BROWNING, MICHAEL L
402 APPELROUTH LANE
KEY WEST FL 33040**

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
	DP			
	BRAY, JOHN J	525 PETRONIA ST.	KEY WEST FL	

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition

	D			<input type="checkbox"/> Delete
	BRAY, ELIZABETH J	525 PETRONIA ST.	KEY WEST FL	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	BROWNING, MICHAEL L	402 APPELROUTH LANE	KEY WEST FL 33040	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	BOEHM, ROBERT P	706 10TH STREET	MUKILTEO WA 98275	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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	D			<input type="checkbox"/> Delete
	WILLIS, TONY	2432 FLAGLER AVE.	KEY WEST FL 33040	

				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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				<input type="checkbox"/> Delete
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				<input type="checkbox"/> Change	<input type="checkbox"/> Addition
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13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (10/00)