

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Bandra B. Mathews  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE

DOCUMENT # P94000004611 (7)

1. Corporation Name  
**THOMAS B. BRADLEY, INCORPORATED**

SECRETARY OF STATE

Principal Place of Business  
3802 EHRlich RD  
SUITE 210  
TAMPA FL 33624

Mailing Address  
3802 EHRlich RD  
SUITE 210  
TAMPA FL 33624

DATE OF BIRTH IN THIS SPACE

3. Date first organized (if available) 01/10/1994  
3b. Date of last report

2. Principal Place of Business  
21 18801 N. DALE MAARY  
26 18801 N. DALE MAARY

4. FET Number 59-3228714  
Applied For Not Applicable

22 Suite, Apt. #, etc.  
27 ~~NA~~

5. Certificate of status desired  \$8.75 Additional Fee Required

23 City & State LUTZ, FL  
28 LUTZ, FL

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

24 Zip 33549 Country U.S.A.  
29 Zip 33549 Country U.S.A.

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
PHILLIPS, GEORGE W  
3802 EHRlich RD  
SUITE 210  
TAMPA FL 33624

10. Name and Address of New Registered Agent  
B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City FL B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when registering) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PHILLIPS, GEORGE W	1.2 NAME	
STREET ADDRESS	3802 EHRlich RD SUITE 210	1.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL 33624	1.4 CITY - ST - ZIP	
TITLE	PRES.	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOMAS B. BRADLEY	2.2 NAME	
STREET ADDRESS	18801 N. DALE MAARY HWY.	2.3 STREET ADDRESS	
CITY - ST - ZIP	LUTZ, FL 33549	2.4 CITY - ST - ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information included on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Thomas B. Bradley* THOMAS B. BRADLEY 1-13-95 813-949-2510  
SIGNATURE AND TYPED OR PRINTED NAME OF REGISTERED AGENT