


**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Feb 21, 2007 08:00 A
Secretary of State

DOCUMENT # P94000019967 1. Entity Name THE BREMER GROUP CO.	
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Principal Place of Business 11243-5 ST JOHNS INDUSTRIAL PKWY SOUTH JACKSONVILLE, FL 32246 US	Mailing Address 11243-5 ST JOHNS INDUSTRIAL PKWY SOUTH JACKSONVILLE, FL 32246 US
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01052007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3290345	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**BREMER, ROSS L
11243-5 ST JOHNS INDUSTRIAL PKWY. S.
JACKSONVILLE, FL 32246**

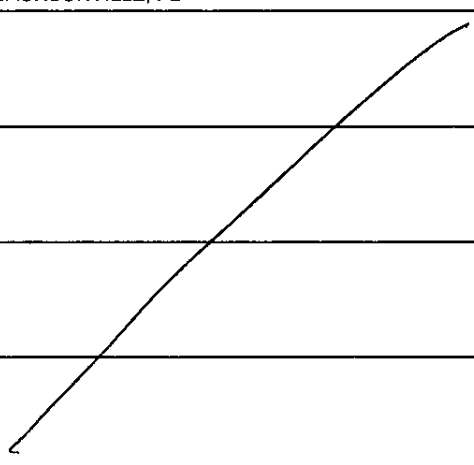
**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

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

FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	000000641921 03/01/07-90018-012 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BREMER, ROSS L 11243-5 ST JOHNS IND PKWY S JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS PERRIN, KAREN 11243-5 ST. JOHNS INDOS PKWY S. JACKSONVILLE, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Karen Bremer VP **2/15/07** **904-645-0004**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #