## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## May 02, 2007 8:00 am Secretary of State 05-02-2007 90057 008 \*\*\*150.00 DOCUMENT # P94000042413 1. Entity Name BRANNEN HOLDINGS, INC. Principal Place of Business Mailing Address 40 SOUTH PALAFOX PL P.O. BOX 940 SUITE 500 GULF BREEZE, FL 32562 PENSACOLA, FL 32505 No Chq-P CR2E034 (11/05) 02052007 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3259459 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BRANNEN, DAVID A DO NOT WRITE 40 SOUTH PALAFOX PL SUITE 500 IN THIS SPACE PENSACOLA, FL 32505 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) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2007 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS PD TITLE BRANNEN, DAVID A NAME STREET ADDRESS P.O. BOX 940 CITY-ST-ZIP GULF BREEZE, FL 32562 TITLE NAME STREET ADDRESS CITY-ST-7/P TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

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

NAME STREET ADDRESS CITY-ST-7IP