



FILED
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Secretary of State

05-04-2007 90080 050 ***158.75

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # P94000092318		
1. Entity Name BRUNI ASSOCIATES, INC.		
Principal Place of Business 755 FORSYTH ST BOCA RATON, FL 33487 US		Mailing Address 755 FORSYTH ST BOCA RATON, FL 33487 US
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BRUNI, DONALD J 755 FORSYTH ST BOCA RATON, FL 33487		66019593  04042007 No Chg-P CR2E034 (11/05) 4. FET Number 65-0696520 Applied For Not Applicable 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> 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
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD BRUNI, DONALD J 755 FORSYTH ST BOCA RATON, FL 33487	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S BRUNI, JOYCE 755 FORSYTH ST BOCA RATON, FL 33487	
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
TITLE NAME STREET ADDRESS CITY - ST - ZIP		
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 changed, or on an attachment with an address, with all other title empow...		
SIGNATURE: <i>Donald Bruni</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNER (OFFICER, DIRECTOR, OR CLERK)</small>		<i>6/19/07</i> + <i>561 703 6489</i> <small>Date Daytime Phone #</small>