## **2007 FOR PROFIT CORPORATION**

## **ANNUAL REPORT**

## DOCUMENT # P94000094296

1. Entity Name
BRINKLEY FAMILY CORPORATION, INC.



Principal Place of Business Mailing Address FILED Jan 10, 2007 8:00 am Secretary of State

01-10-2007 90049 004 \*\*\*150.00

400010mg

Principal Place of Business		Mailing Address	Mailing Address		•	•			
		3100 LAUDER PLACE Tallahassee, FL 3231	3100 LAUDER PLACE TALLAHASSEE, FL 32312						
				1	1 <b>13 C</b> A <b>34</b> 1 1 <b>3</b> C				1 <b>111</b> () (1111
2. Principal Pi	ace of Business - No P.O. Box #	3. Mailing Address	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		01042007	Chg-P	CR2E03	4 (12/06)	
City & State		City & State	City & State		4. FEI Number 59-3287				plied For at Applicable
Zip	Country	Zip	Country		5. Certificate o	f Status Desired		8.75 Add ee Require	
	6. Name and Address of Current	Registered Agent		1	7. Name and A	ddress of New	Registered A	gent	
				·					
LAUDER, WILMA B 3100 LAUDER PLACE TALLAHASSEE, FL 32312				Street Address (P.O. Box Number is Not Acceptable)					
			City				FL	Zip Code	e
8. The shows remaind entity submits this statement for the purpose of changing its register.				r registere	dagent or both	in the State of F		miliar with	and accept
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									
#ILE NOW!!! FEE 18 \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2007 Fee will be \$550.00 Trust Fund Contribution. Added to Fees									
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS/C	HANGES TO OF	FICERS AND	DIRECTORS	S IN 11
TITLE	D	☐ Delete	TITLE	50.	0-00	Je T	TT-	Change	☐ Addition
NAME STREET LODGEGG	BRINKLEY, ROBERT T III		NAME	1,5		ue I	<del></del>	<del></del>	
STREET ADORESS CITY-ST-ZIP	4222 NORTH OCEAN DRIVE HOLLYWOOD BEACH, FL 330	16	STREET ADDRESS CITY-ST-ZIP	gy .		,88-F	اب وا	<del>_</del> _	
	D		$\leftarrow$	PLI	NKIZY	( ) LOE	SCRT	<u> </u>	<del>"</del>
TITLE NAME	LAUDER, WILMA B	☐ Delete	TITLE NAME		`	<b>-</b>		Change	☐ #3dition
STREET ADDRESS	3100 LAUDER PLACE		STREET ADDRESS						
CITY-ST-ZIP	TALLAHASSEE, FL 32312		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE	<u> </u>				☐ Change	Addition
NAME		2 5000	NAME						_,
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP						
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<u> </u>		Пан.					·	Channa .	□ Addition
NAME		☐ Delete	TITLE NAME					☐ Change	☐ Addition
STREET ADDRESS			STREET ADDRESS	1					
CITY-ST-ZIP			CITY-ST-ZIP						
TITLE		☐ Delete	TITLE	<u> </u>				Change	Addition
NAME		_ D01000	NAME						
STREET ADDRESS			STREET ADDRESS						
CITY-ST-ZIP			CITY-ST-ZIP	l					
12. Thereby o	certify that the information supplied wit	h this filing does not qualify for	the exemptions of	contained	in Chapter 119	Florida Statutes	I further certif	v that the in	Mormation

Indicated on this report or supplied with this fairly does not quality for the eventuous contained in Chapter 119, ritoria statutes, intriner certify that the incommon indicated on this report or suppliemental 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: Mi

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

893-2321