

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morhart  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000014972 (0)  
1. Corporation Name

BRADY'S SOLID SURFACES, INCORPORATED

Principal Place of Business

Mailing Address

14549 HWY. 89  
JAY FL 32565

14549 HWY. 89  
JAY FL 32565

APPROVED  
AND  
FILED

96 JUN 13 PM 12:01

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 P.O. BOX 651

22 City & State

27 City & State  
JAY, FLORIDA

23 Zip Country

28 Zip Country  
32565 SANTA ROSA

3. Date Incorporated or Qualified

3a. Date of Last Report

02/21/1995

4. FEI Number

Applied For  
Not Applicable

59-3299831

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEWART, DANIEL  
310 ELMIRA ST.  
MILTON FL 32570

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL 85 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 (must be typed or printed and not applicable)

(NOTE: Registered Agent signature required when re-statuting)

(Date)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  
NAME WATSON, BRADY C  
STREET ADDRESS 6401 IVA RD.  
CITY - ST - ZIP JAY FL 32565

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

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TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

11 TITLE  
12 NAME  
13 STREET ADDRESS  
14 CITY - ST - ZIP

21 TITLE  
22 NAME V  
23 STREET ADDRESS WATSON, SARAH C.  
24 CITY - ST - ZIP 6401 IVA RD.  
JAY, FL 32565

31 TITLE T7S  
32 NAME MICHAEL T. LAMBETH  
33 STREET ADDRESS 5066 IVA RD.  
34 CITY - ST - ZIP JAY, FL 32565

41 TITLE  
42 NAME  
43 STREET ADDRESS  
44 CITY - ST - ZIP

51 TITLE  
52 NAME  
53 STREET ADDRESS  
54 CITY - ST - ZIP

61 TITLE  
62 NAME  
63 STREET ADDRESS  
64 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 119.07(3)(k), Florida Statutes. I further certify that the information indicated 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Sarah C. Watson SARAH C. WATSON

6/6/96

(904)675-3099

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Original Number

CR2E034 (3/96)