

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Aug 06 1997 8:00am
Secretary of State

DOCUMENT # P95000081962 (9)

1. Corporation Name

BRANTLEY AND ASSOCIATES, INC.



Principal Place of Business

Mailing Address

200-C SOUTH MONROE ST
TALLAHASSEE FL 32302

200-C SOUTH MONROE ST
TALLAHASSEE FL 32302

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

10/25/1995

3a. Date of Last Report

04/12/1996

4. FEI Number

59-3340668

Applied For

Not Applicable

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 owes or has paid the current year Intangible
Personal Property Tax due June 30.

☒ Yes

☐ No

2. Principal Place of Business

21 6659 Proctor Road

Suite, Apt. #, etc.

City & State

23 Tallahassee, FL

Zip

24 32308

Country

25 USA

2a. Mailing Address

26 6659 Proctor Road

Suite, Apt. #, etc.

City & State

28 Tallahassee, FL

Zip

29 32308

Country

30 USA

9. Name and Address of Current Registered Agent

BRANTLEY, BOBBY
200-C S MONROE ST
TALLAHASSEE FL 32302

10. Name and Address of New Registered Agent

81 Name

Bobby Brantley

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

6659 Proctor Road

83

84 City

Tallahassee

FL

85 Zip Code

32308

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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P
BOBBY BRANTLEY
STREET ADDRESS 3411 JONATHANS LANDING
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME ST
PATRICIA M. BRANTLEY
STREET ADDRESS 3411 JONATHANS LANDING
CITY-ST-ZIP TALLAHASSEE FL

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME Bobby Brantley

1.3 STREET ADDRESS 6659 Proctor Rd.

1.4 CITY-ST-ZIP Tallahassee FL 32308

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME Patricia M Brantley

2.3 STREET ADDRESS 6659 Proctor Rd

2.4 CITY-ST-ZIP Tallahassee, FL 32308

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (4/97)