

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

**FILED
Feb 02, 2005 8:00 am
Secretary of State**

02-02-2005 90036 011 ***150.00

DOCUMENT # P95000087000

1. Entity Name
BRAMINGHAM ESTATE, INC.



Principal Place of Business

1760 BRISTOL RD
WARRINGTON, PA 34770-0245 US

Mailing Address

1760 BRISTOL ROAD PO BOX 160
WARRINGTON, PA 18976 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102005 Chg-P CR2E034 (10/03)

4. FEI Number
59-3346480

Applied For
Not Applicable

5. Certificate of Status Desired \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HARRIS, STEPHEN B
1110 S.W. IVANHOE BLVD.
GUEST QUARTER "G"
ORLANDO, FL 32804

Name *Stephen B. Harris*

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

*1000 Maitland Centre Commons
Suite 400*

City *Maitland* FL Zip Code *32751*

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

Stephen B. Harris

Pres

1/11/05

DATE

Signature, typed or signed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing

Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE S Delete
NAME STURN, GREGORY L
STREET ADDRESS 1760 BRISTOL RD PO BOX 160
CITY-ST-ZIP WARRINGTON, PA 18976

TITLE P Delete
NAME HARRIS, STEPHEN B
STREET ADDRESS 1760 BRISTOL RD PO BOX 160
CITY-ST-ZIP WARRINGTON, PA 18976

TITLE Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Change Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I 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 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 like empowered.

SIGNATURE:

Stephen B. Harris

1/25/05

Date Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEPHEN B. HARRIS PRES