2008 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P96000034124

1. Entity Name WILLIAM M. BRAUER, INC.



Principal Place of Business

6678 CEDAR POINT RD JACKSONVILLE, FL 32226 Mailing Address

6678 CEDAR POINT RD JACKSONVILLE, FL 32226

US

FILED Apr 23, 2008 08:00 AN Secretary of State



04112008

No Chg-P

CR2E034 (11/05)

4. FEI Number 59-3372118 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

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6678 CED	VILLIAM M AR POINT RD VILLE, FL 32226		DO NOT WRITE IN THIS SPACE								
the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or re	gistered agent, or bo	oth, in the State of Florida. I am familiar with, and accept						
SIGNATURE_	Signature, typed or printed name of registered agent and title	l'applicable. (NOTE: Registere	d Agent signature r	equired when reinstating)	DATE						
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution.	ncing	\$5.00 May Be Added to Fees							
10.	OFFICERS AND DIREC	CTORS									
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRAUER, WILLIAM M 6678 CEDAR POINT RD JACKSONVILLE, FL 32226				U00000916222 05212708+80020-011-150.00						
TITLE NAME STREET ADDRESS CITY-ST-ZIP					US/12/007-00/20/7011 130100						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				5일 15등학 경험 등 시나다.	NOT WRITE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN	THIS SPACE						
TITLE NAME STREET ADDRESS CITY-ST-ZIP											
TITLE	_										

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 like empowered. changed, or on an attachment with an address,

SIGNATURE: 42

STREET ADDRESS CITY-ST-ZIP