

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000049120

Entity Name: BRIESON CORP.

FILED  
Mar 19, 2010  
Secretary of State

## Current Principal Place of Business:

14346 WOODSWORTH  
ODESSA, FL 33556 US

## New Principal Place of Business:

14346 WADSWORTH  
ODESSA, FL 33556 US

## Current Mailing Address:

14346 WOODSWORTH  
ODESSA, FL 33556 US

## New Mailing Address:

14346 WADSWORTH  
ODESSA, FL 33556 US

FEI Number: 59-3452217

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PARSONS, GAIL  
14346 WODSWORTH DR  
ODESSA, FL 33556 US

## Name and Address of New Registered Agent:

PARSONS, GAIL  
14346 WADSWORTH DR  
ODESSA, FL 33556 US

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.

SIGNATURE: GAIL PARSONS

03/19/2010

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P  
Name: PARSON, GAIL  
Address: 14346 WADSWORTH DR  
City-St-Zip: ODESSA, FL 33556

Title: VP  
Name: BRIESACHER, ROBERT  
Address: 7701 ANN BALLARD RD  
City-St-Zip: TAMPA, FL 33634

Title: T  
Name: BRIESACHER, ROBERT  
Address: 7701 ANN BALLARD RD  
City-St-Zip: TAMPA, FL 33634

Title: S  
Name: BRIESACHER, CINDY  
Address: 7701 ANN BALLARD RD  
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: GAIL PARSONS

P

03/19/2010

Electronic Signature of Signing Officer or Director

Date