## ZUUU FUK FKUFII GURPUKAIIUN ANNUAL REPORT

## DOCUMENT # PQ8000053272

1. Entity Name
BRENNAN MARKETING CORPORATION



FILED Feb 09, 2006 08:00 AM Secretary of State

Principal Place of Business
433 HARBOR DRIVE SOUTH
INDIAN ROCKS BEACH, FL 33785

Mailing Address

433 HARBOR DRIVE SOUTH INDIAN ROCKS BEACH, FL 33785



## DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

02042006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For

5. Certificate of Status Desired

59-3519816

\$8.75 Additional Fee Required

Not Applicable

BRENNAN, BRENDA 433 HARBOR DRIVE SOUTH INDIAN ROCKS BEACH, FL 33785

## DO NOT WRITE IN THIS SPACE

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 Signature, typod or printed name of regressrod agent and titls it applicable (NOTE: Registered Agent aignature required when reinstailing) DATE						
FILE NOWIII FEE IS \$150,00 After May 1, 2006 Fee will be \$550.00		Election Campaign Financing \$5.00 May		\$5.00 May Be Added to Fees	000000427950 02/21/06-80028-008	150.00
10.	OFFICERS AND DIRE	CTORS				
TITLE KAME STREET ADDRESS CITY-ST-ZIP	D BRENNAN, BRENDA L 433 HARBOR DR SOUTH INDIAN ROCKS BEACH, FL 33785					
TITLE NAME STHEET ADDRESS CITY-ST-ZIP						
TITLE MAME SYMEET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE HAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby certify that the information supplied with this filling 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 establishment with an address, with all other like empowered.						

SIGNING OFFICER OR DIRECTOR