

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000015738

FILED  
Jan 04, 2007  
Secretary of State

Entity Name: BROTHERS II RECOVERY INC.

## Current Principal Place of Business:

1591 CYPRESS AVE  
MELBOURNE, FL 32935 US

## New Principal Place of Business:

## Current Mailing Address:

1591 CYPRESS AVE  
MELBOURNE, FL 32935 US

## New Mailing Address:

FEI Number: 59-3603422

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LADREW, DAVID  
PO BOX #510802  
MELBOURNE BEACH, FL 32951 US

## Name and Address of New Registered Agent:

LADREW, DAVID  
1591 CYPRESS AVE  
MELBOURNE, FL 32935 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:

01/04/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: LA DREW, DAVID  
Address: PO BOX # 510802  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: V ( ) Delete  
Name: LA DREW, WILLIAM B  
Address: PO BOX #510802  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TS ( ) Delete  
Name: LA DREW, DEBORAH  
Address: PO BOX # 510802  
City-St-Zip: MELBOURNE BEACH, FL 32951

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID LADREW

PRES

01/04/2007

Electronic Signature of Signing Officer or Director

Date