

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025749

Entity Name: BRYSON OF BREVARD INC.

FILED
Jan 25, 2005
Secretary of State

Current Principal Place of Business:

636 EYSTER BLVD
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

636 EYSTER BLVD
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-3575002

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MULLEN, KENDAL B
656 EYSTER BLVD
ROCKLEDGE, FL 32955 US

Name and Address of New Registered Agent:

MULLEN, KENDAL B
636 EYSTER BLVD
ROCKLEDGE, FL 32955 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: KENDAL B MULLEN

01/25/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPT () Delete
Name: MULLEN, KENDAL B
Address: 802 PINE VALLEY CT
City-St-Zip: ROCKLEDGE, FL 32955

Title: V () Delete
Name: MULLEN, SYVIA
Address: 2914 S. HUNTINGTON LN
City-St-Zip: ROCKLEDGE, FL 32955

Title: S () Delete
Name: HAMBRIDGE, PAUL
Address: 803 POINCIANA ST
City-St-Zip: ROCKLEDGE, FL 32955

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPT (X) Change () Addition
Name: MULLEN, KENDAL B
Address: 331 BROOKCREST CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

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 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 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: KENDAL B MULLEN

DPT

01/25/2005

Electronic Signature of Signing Officer or Director

Date