

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025749

FILED  
Mar 27, 2007  
Secretary of State

Entity Name: BRYSON OF BREVARD INC.

**Current Principal Place of Business:**

446 GUS HIPP BLVD.  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

**Current Mailing Address:**

446 GUS HIPP 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  
446 GUS HIPP BLVD.  
ROCKLEDGE, FL 32955      US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

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

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

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

**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: SYLVIA MULLEN

V

03/27/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date