

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025749

Entity Name: BRYSON OF BREVARD INC.

FILED
Jan 08, 2008
Secretary of State

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: MULLLEN, 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: V (X) Change () Addition
Name: MULLLEN, SYLVIA
Address: 4009 N. INDIAN RIVER DRIVE
City-St-Zip: COCOA, FL 32927

Title: S (X) Change () Addition
Name: HAMBIDGE, PAUL
Address: 640 CASA GRANDE DR.
City-St-Zip: MELBOURNE, FL 32940

I hereby certify that the information supplied with this filing does not qualify 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

01/08/2008

Electronic Signature of Signing Officer or Director

_____ Date