

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025749

FILED  
Apr 27, 2012  
Secretary of State

Entity Name: BRYSON OF BREVARD INC.

**Current Principal Place of Business:**

446 GUS HIPPI BLVD.  
ROCKLEDGE, FL 32955

**New Principal Place of Business:**

446 GUS HIPPI BLVD.  
ROCKLEDGE, FL 32955 US

**Current Mailing Address:**

446 GUS HIPPI BLVD.  
ROCKLEDGE, FL 32955

**New Mailing Address:**

446 GUS HIPPI BLVD.  
ROCKLEDGE, FL 32955 US

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 HIPPI 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

**OFFICERS AND DIRECTORS:**

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

Title: V  
Name: MULLEN, SYLVIA  
Address: 4009 N. INDIAN RIVER DRIVE  
City-St-Zip: COCOA, FL 32927 US

Title: S  
Name: MULLEN, SHANNON R  
Address: 331 BROOKCREST CIRCLE  
City-St-Zip: ROCKLEDGE, FL 32955 US

I hereby 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 all other like empowered.

SIGNATURE: KENDAL B MULLEN

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04/27/2012

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date