

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000041646

Entity Name: M.G. BRIM, INC.

FILED  
Mar 16, 2006  
Secretary of State

## Current Principal Place of Business:

4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34954

## New Principal Place of Business:

4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34953

## Current Mailing Address:

4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34954

## New Mailing Address:

4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34953

FEI Number: 65-0931254

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BRIMBLE, GARY E  
4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34954 US

## Name and Address of New Registered Agent:

BRIMBLE, GARY E  
4633 S.W. KEATS STREET  
PORT ST LUCIE, FL 34953 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:

03/16/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PRES ( ) Delete  
Name: BRIMBLE, GARY  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34954

Title: TREA ( ) Delete  
Name: BRIMBLE, MARIA  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34954

Title: SEC ( ) Delete  
Name: WORKINGER, ASHLEY M  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34954

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: BRIMBLE, GARY  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: TREA (X) Change ( ) Addition  
Name: BRIMBLE, MARIA  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34953

Title: SEC (X) Change ( ) Addition  
Name: WORKINGER, ASHLEY M  
Address: 4633 S.W. KEATS STREET  
City-St-Zip: PORT ST LUCIE, FL 34953

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: MARIA BRIMBLE

TRES

03/16/2006

Electronic Signature of Signing Officer or Director

Date