2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P99000070990

1. Entity Name EDWARD RILEY BRADLEY'S, INC.



FILED Feb 03, 2006 08:00 AM Secretary of State

Principal Place of Business

104 CLEMATIS ST. WEST PALM BEACH, FL 33401 Mailing Address

470 COLUMBIA DR.

D-201

DO NOT WRITE IN THIS SPACE

WEST PALM BEACH, FL 33409

US



01302006

No Chg-P

CR2E034 (11/05)

4. FEI Number 65-0941946

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

CONIGLIO, FRANK S 1139 N OCEAN BLVD PALM BEACH, FL 33480

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	e named entity submits this statement for the purpose of chang tions of registered agent.	ging its registered attice or registered agent, or bo	in, in the State of Flohoa. Tam familiar with, and accep
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable.	[NOTE: Registered Agent signature required when reinstating]	DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

10000418705 02/14/06 80018-014 150.00

OFFICERS AND DIRECTORS 10. TITLE NAME CONIGLIO, FRANK S STREET ADDRESS 1139 N OCEAN BLVD CITY-ST-ZIP PALM BEACH, FL 33480 VPS TITLE CONIGLIO, GAIL L NAME 1139 N OCEAN BLVD STREET ADDRESS CITY-ST-ZIP PALM BEACH, FL 33480 TITLE NARDOLILLO, MYLENE NAME STREET ADDRESS 104 CLEMATIS ST WEST PALM BEACH, FL 33401 CITY-ST-ZIP THILE CONIGLIO, NICHOLAS NAME STREET ADDRESS 104 CLEMATIS STREET CITY-ST-ZIP WEST PALM BEACH, FL 33401 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

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12. Thereby certify that the information supplied with this fifing does not qualify for the exemptions contained 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 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 in Black 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

FRANKS CONIGLIO

561-833-3520