## 2005 FOR PROFIT CORPORATION

CITY-ST-ZIP

SIGNATURE:

## Jan 28, 2005 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # P99000080402 01-28-2005 90031 002 \*\*\*150.00 1. Entity Name BRANTLEY CONSULTING CORP. Principal Place of Business - 4 - 6-Mailing Address 5524 MANATEE POINT DR 50007799 P.O. BOX 985 NEW PORT RICHEY, FL 34652 US MANGO, FL 33550 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01122005 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For Brandor 59-3598307 Not Applicable 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name BRANTLEY, WAYNE R Street Address (P.O. Box Number is Not Acceptable) 5524 MANATEE POINT DR NEW PORT RICHEY, FL 34652 BRANDON E 27 Wall La Jake 8. 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. I am familiar with, and accept 54 the obligations of registered agent Oon JAYN E SIGNATURE Signature, typed of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be $\Box$ Trust Fund Contribution. 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PSD TITLE Delete TITLE ☐ Change ☐ Addition BRANTLEY, WAYNER NAME NAME 1716 COMPTON ST STREET ADDRESS 5524 MANATEE POINT DR STREET ADDRESS FL 33511 BRANDON. CITY-ST-ZIP NEW PORT RICHEY, FL 34652 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-77P CiTY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Detete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADORESS

CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). 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 eath; 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

WAYNE BRANTLEY

FILED