2006 FOR PROFIT CORPORATION - -- ANNUAL REPORT

Apr 21, 2006 8:00 am Secretary of State **DOCUMENT # P99000080402** 04-03-2006 90403 008 ***100.00 04-21-2006 90113 005 ****50.00 BRANTLEY CONSULTING CORP. Principal Place of Business Mailing Address 40056919 1716 COMPTON STREET P.O. BOX 985 BRANDON, FL 33511 US MANGO, FL 33550 US 2. Principal Place of Business 3. Mailing Address 5112 WHISPERNGUER Suite, Apt. #. etc. Suite, Apt. #. etc. 03132008 Chg-P CR2E034 (11/05) City & State 4. FEI Number Applied For 59-3598307 Not Applicable 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 1716 COMPTON STREET Street Address IP.P. Box Number is Not Acceptable) BRANDON, FL 33511 90 ALRICO 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 the obligations of registered-agen SIGNATURE 9. Election Campaign Financing Fil.E NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. PSD' Deleta TITLE TITLE Change Addition NAME BRANTLEY, WAYNER NAME 5112 WHISPERING LEAF TR 1716 COMPTON STREET 🐰 STREET ADDRESS STREET ADDRESS ALRICO FL 33554 C/17-51-21P BRANDON, FL 33511 CITY-ST-ZP TITLE Delete TITLE ☐ Change ☐ Addition HAME NAME STREET ADORESS STREET ADDRESS CITY-ST- DP CITY-ST-ZIP TITLE Delete DITLE Change ☐ Addition NAME HARLE STREET ADDRESS STREET ADDRESS CITY-ST-ZP CITY-ST-72P TITLE C Celate TITLE ☐ Change Addition MALE NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP Oelete (MLF III S ☐ Change ☐ Accition NAME STREET ADDRESS STREET ADDRESS CITY-SI-ZIP CITY-ST-ZIP TITLE ☐ Delete HILL Change ☐ Addition NAME NALAF STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 cert; 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 id changed, or on an attachment with an address, with all other like empowered. BRANTEY SIGNATURE: Wa

FILED