2005 FOR PROFIT CORPORATION ANNUAL REPORT

May 02, 2005 8:00 am Secretary of State **DOCUMENT # S72429** 05-02-2005 90430 041 ***150.00 1. Entity Name BRAMMER & ASSOCIATES, P.A. Principal Place of Business Mailing Address 13830 - 58TH STREET NORTH 13830 - 58TH STREET NORTH SUITE 410 SUITE 410 CLEARWATER, FL 33760 CLEARWATER, FL 33760 2. Principal Place of Business 3. Mailing Address 4900 Creekside Drivl 4900 creekside Drive Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/03) 04252005 Chg-P Suite M Suite M City & State 4. FEI Number Applied For City & State xarwater Clearwater P Not Applicable 59-3083984 Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name BRAMMER, LLOYD J. Street Address (P.O. Box Number is Not Acceptable) 14200 REBECCA COURT LARGO, FL 33774 Zip Code 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 agent. SIGNATURE. (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. OFFICERS AND DIRECTORS 11. D TITLE Change ■ Addition TITLE ☐ Delete BRAMMER, LLOYD J. NAME NAME STREET ADDRESS STREET ADDRESS 14200 REBECCA COURT CITY-ST-ZIP LARGO, FL CITY-ST-ZIP ☐ Change Addition Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete TITLE ☐ Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Delete ☐ Change TIT1 F TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Delete ☐ Change TITLE TITLE NAME NAME STREET AODRESS STREET ADDRESS CITY-ST-ZIP 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 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 Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

LLOYD J. BRAMMER
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED

727-572-1040