2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000007143

MATTONI, MARY

51 LOCUST AVE

NEW CANAAN, CT 06840

Name:

Address:

City-St-Zip:

FILED Apr 16, 2008 Secretary of State

Entity Name: BRAKELEY BRISCOE INC. **Current Principal Place of Business: New Principal Place of Business:** 51 LOCUST AVE 322 W. BELLEVUE AVE NEW CANAAN, CT 06840 SAN MATEO, CA 94402 **Current Mailing Address: New Mailing Address:** 51 LOCUST AVE 322 W. BELLEVUE AVE NEW CANAAN, CT 06840 SAN MATEO, CA 94402 FEI Number: 06-1064416 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WERTHEIMER, STEPHEN 22759 EL DORÁDO DRIVE US BOCA RATON, FL 33433 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: (X) Change () Addition BRAKELEY, GEORGE A III BRAKELEY, GEORGE A III Name: Name: 51 LOCUST AVE 138 EAST AVE. Address: Address: City-St-Zip: NEW CANAAN, CT 06840 City-St-Zip: NEW CANAAN, CT 06840 DV Title: DV Title: () Delete (X) Change () Addition BRISCOE, ALDEN Name: Name: BRISCOE, ALDEN 51 LOCUST AVE 322 W. BELLEVUE AVE. Address: Address: NEW CANAAN, CT 06840 City-St-Zip: City-St-Zip: SAN MATEO, CA 94402 () Delete Title: (X) Change () Addition DP Title: DP BRISCOE, MARIANNE G BRISCOE, MARIANNE G Name: Name: 51 LOCUST AVE 322 W. BELLEVUE AVE. Address: Address: City-St-Zip: NEW CANAAN, CT 06840 City-St-Zip: SAN MATEO, CA 94402 Title: (X) Delete Title: () Change () Addition

I hereby certify that the information supplied with this filing does not qualify 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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARIANNE G. BRISCOE DP 04/16/2008