

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**

**Apr 30, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P03000148200**

1. Entity Name  
**MARTIN & BROWN, INC.**



Principal Place of Business  
**4290 DEL PRADO CIRCLE  
PACE, FL 32571**

Mailing Address  
**4290 DEL PRADO CIRCLE  
PACE, FL 32571**



04242008 No Chg-P CR2E034 (11/05)

4. FEI Number <b>20-0397839</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

DO NOT WRITE IN THIS SPACE

**6. Name and Address of Current Registered Agent**

**MARTIN, JOHN A JR.  
4290 DEL PRADO CIRCLE  
PACE, FL 32571**

DO NOT WRITE  
IN THIS SPACE

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) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

U00000334660  
05/23/08-80041-018 150.00

**10. OFFICERS AND DIRECTORS**

TITLE	PT
NAME	MARTIN, JOHN A JR.
STREET ADDRESS	4290 DEL PRADO CIRCLE
CITY-ST-ZIP	PACE, FL 32571
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE  
IN THIS SPACE

12. I hereby certify that the information supplied with this filing 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 Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** John A. Martin Jr. **4/28/08** **850-384-1772**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Day Daytime Phone #