

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

CORPORATION  
ANNUAL REPORT  
1995



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
AND  
FILED

95 MAY -1 PM 2:45

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # **S29836** (1)

1. Corporation Name  
**KEVIN BROWN CONSTRUCTION, INC.**

DO NOT WRITE IN THIS SPACE.

Principal Place of Business  
**1829 INGRAM AVE.  
SARASOTA FL 34232  
US**

Mailing Address  
**1829 INGRAM AVE.  
SARASOTA FL 34232  
US**

3. Date Incorporated or Qualified  
**02/06/1991**

3a. Date of Last Report  
**04/26/1994**

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country

4. FEI Number  
**59-3044552**

Applied For  
 Applied For  
 Not Applicable

5. Certificate of Status Desired  
 **\$8.75** Additional Fee Required

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

8. This corporation has liability for intangible tax under S. 189.032, Florida Statutes  
 Yes  No

9. Name and Address of Current Registered Agent  
**BROWN, KEVIN R.  
1829 INGRAM AVE.  
SARASOTA FL 34232**

10. Name and Address of New Registered Agent

B1 Name  
B2 Street Address (P.O. Box Number is Not Acceptable)  
B3  
B4 City  
**FL** B5 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)

12. OFFICERS AND DIRECTORS	
TITLE	DP
NAME	BROWN, KEVIN R.
STREET ADDRESS	1527 HONORE AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	DST
NAME	BROWN, ANNETTE M.
STREET ADDRESS	1527 HONORE AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	V
NAME	MILLER, MICHAEL L
STREET ADDRESS	1527 HONORE AVE.
CITY - ST - ZIP	SARASOTA FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1. 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	DP BROWN, KEVIN R.
13 STREET ADDRESS	1527 Ingram Ave.
14 CITY - ST - ZIP	Sarasota, FL 34232
2. 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	DST BROWN, ANNETTE M.
23 STREET ADDRESS	1527 Ingram Ave.
24 CITY - ST - ZIP	SARASOTA, FL 34232
3. 1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	V MILLER, MICHAEL L.
33 STREET ADDRESS	1713 NEIDA Lane
34 CITY - ST - ZIP	Sarasota, FL 34232
4. 1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
42 NAME	V CAPPUCETTI, RONALD M.
43 STREET ADDRESS	901 75th St. W.
44 CITY - ST - ZIP	Bradenton, FL 34209
5. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY - ST - ZIP	
6. 1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: Kevin R. Brown 4-28-95 342-4038  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date (Include Year)