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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996
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DOCL			OF CORPORATIONS			
1. Corporati	JMENT # S2983	36 (1)				
	N BROWN CONSTRUCTION	, INC.				
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Principal Plac	ce of Business	Mailing Address				
1829 INGR	AM AVE.	1829 INGRAM AVE.				
SARASOTA US	A FL 34232	SARASOTA FL 3423: US	2			
				3. Date Incorporated or Qualified 02/06/1991	3a. Date of Last F 05/01/19	
2. Principal F	Place of Business	2a. Mailing Address		4. FEI Number 59-3044552		Applied For
Suite, Apt	. #, etc.	Suite, Apt. #, etc.			····	Not Applicable  5 Additional
City & Sta	do	27		5. Certificate of Status Desired		Required
3	ne -	City & State		Election Campaign Financing     Tout Fund Coatribution		0 May Be
Ζφ	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for it	Aode	d to Fees
4	25 9. Name and Address of Currer	29	30	Florida Statutes Yes	□ No	199.002,
	9. Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address of New R	legistered Agent	
BROW	n, kevin r.					
	NGRAM AVE.		82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	·
SARAS	OTA FL 34232		83			
			84 City		15-1 -	
11 Purcuent	to the provisions of Carling 207 or on		- "	oration submits this statement for the purp		p Code
familiar w SIGNATURE	ered agent, or both, in the State of Floric rith, and accept the obligations of, Secti	ion 607.0505, Florida Statute	zed by the corporation's boars.	ard of directors. I hereby accept the appo	pintment as registered	lagent. I am
	Skillulture, typed or printed page of recistored specific	and the Handal II.				
12.	Signature typed or printed name of registered agent OFFICERS AND		OTE: Registered Agent signature requir	red when reinstating)	DATE	
I2.	OFFICERS AND				DATE CERS AND DIRECTO	RS IN 12
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oath; that I am an officer or director of the corporation or the receiver or trustee report is true and accurate and that my signature shall have the same legal effect as if made unde appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-25-96 362-4038
Date Dayone Phone •