

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P99000060874

FILED
Mar 27, 2002 8:00 AM
Secretary of State

Entity Name: BROWNLEE AND ASSOCIATES, INC.

Current Principal Place of Business:

414 N ALEXANDER ST
PLANT CITY, FL 33566 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1030
PLANT CITY, FL 335641030 US

New Mailing Address:

PO BOX 4894
PLANT CITY, FL 335644894 US

FEI Number: 59-3591455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWNLEE, CARL
414 N ALEXANDER ST
PLANT CITY, FL 33566

Name and Address of New Registered Agent:

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

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: BROWNLEE, CARL
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

Title: VT () Delete
Name: BROWNLEE, BRUCE
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

Title: D () Delete
Name: BROWNLEE, GERALDINE
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

Title: D () Delete
Name: BROWNLEE, DENNIS
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: BROWNLEE, CARL
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

Title: T (X) Change () Addition
Name: BROWNLEE, BRUCE
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VS (X) Change () Addition
Name: BROWNLEE, DENNIS
Address: 414 N ALEXANDER ST
City-St-Zip: PLANT CITY, FL 33566

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

SIGNATURE: CARL BROWNLEE

P

03/27/2002

Electronic Signature of Signing Officer or Director

_____ Date