

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 213905

FILED
May 15, 2009
Secretary of State

Entity Name: LOWRIE BROWN INVESTMENT CO.

Current Principal Place of Business:

2104 W. CENTRAL BLVD
ORLANDO, FL 32805 US

New Principal Place of Business:

Current Mailing Address:

PO. BOX 568546
ORLANDO, FL 32856 US

New Mailing Address:

FEI Number: 59-0861253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, LOWRIE W
18326 ROSE ST
GROVELAND, FL 34736 US

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: BROWN, JOHN M
Address: 3021 BRANDYWINE DR
City-St-Zip: ORLANDO, FL 32806

Title: PD () Delete
Name: BROWN, LOWRIE W., III
Address: 18326 ROSE STREET
City-St-Zip: GROVELAND, FL 34736

Title: SD () Delete
Name: BROWN, MARY ANN
Address: 18326 ROSE STREET
City-St-Zip: GROVELAND, FL 34736

Title: D () Delete
Name: FULLER, MARGRET
Address: 9317 FERNERY RD.
City-St-Zip: LEESBERG, FL

Title: D () Delete
Name: ADLER, MARY C
Address: 1206 JOSSIE LN.
City-St-Zip: MCLEAN, VA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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Name:
Address:
City-St-Zip:

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

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

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.

SIGNATURE: JOHN M BROWN

VPD

05/15/2009

Electronic Signature of Signing Officer or Director

_____ Date