## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT : CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 557659

1. Corporation Name

BROWN'S T.V., INC.

FILED Apr 26, 1999 8:00 am Secretary of State 04-26-1999 90054 030 \*\*\*150.00

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Suite, Apt. #, etc. 29 BROWNS T.V. INC. 21 BROWNS T.V. INC. 21 City & State 319 IOth Ave. N. 23 Jacksonville Bch. FL 32250 29 County 20 Jacksonville Bch. FL 32250 29 1 Jacksonville Bch. FL 32250 29 29 1 Jacksonville Bch. FL 32250 29 29 1 Jacksonville Bch. FL 32250 29 29 1 Jacksonville Bch. FL 32250 30 BCACH BLVD JACKSONVILLE BCACH FL 32250 31 City State Address (P.O. Box Number is Not Acceptable) 32 Street Address (P.O. Box Number is Not Acceptable) 33 Street Address (P.O. Box Number is Not Acceptable) 34 City FL 35 Zip Code 34 City FL 35 Zip Code 35 Zip Code 36 City FL 35 Zip Code 37 City State 3 Jacksonville Bch. Fl 32250 38 BCACH BLVD JACKSONVILLE BCACH FL 32250 39 BCACH BLVD JACKSONVILLE BCACH FL 32250 30 BCACH BLVD 30 JCACH BCACH	Principal Place	e of Business	Mailing Address						
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2. Principal Piece of Business   2a. Mailling Address   4. FEH Number   59-1799783   Not Applied For Sulfe, Apt. etc.   22   Sulfe, Apt. etc.   27   S	· .		2,			<u> </u>			
2. Principal Place of Business   2. A. Malling Address   5.   5.   7897933						'			
Suite, Apt. #, etc.    Suite, Apt. #, etc.		(D	Lo- Maille- Add					An	plied For
Suite, Apt. F. etc.    Suite, Apt. F. etc.   Suite, Apt. F. etc.						I **		<del></del>	<u> </u>
Secretificate of Status Desired   Fee Required	21					29-1/99/93			
City & Study 319   Oth Ave. N. 20   20   20   20   319   Oth Ave. N. 20   20   20   20   20   20   20   20	<u> —                                    </u>					5. Certifcate of Status Desired		•	
33   Jacksonville Bch, FL 32250   28   Jacksonville Bch, FL 32250   29   3o    8. This corporation was the current year intengible personal Property Tax.   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name Address of New R			PROWN'S	BROWN'S T.V. INC.					<u> </u>
Table   Tabl	<del></del>		TIQ IIXD AVE. N.		1 -		•	*	
BROWN, LENTON A., J.R. 830 BEACH BLVD JACKSONVILLE BEACH FL 32250  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 harreby accept the appointment as registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I harreby accept the appointment as registered agent, and the provisions of Sections 607,9502 and 607,1508, Florida Statutes.  SIGNAT TURE  SIGNAT TURE  SIGNAT TURE  SIGNATIVE  SIGNATIV									o rees
9. Name and Address of Current Registered Agent  BROWN, LENTON A., JR. 830 BEACH BLVD JACKSONVILE BEACH FL 32250  84 City  Steret Address (P.O. Box Number is Not Acceptable)  85 Steret Address (P.O. Box Number is Not Acceptable)  86 Steret Address (P.O. Box Number is Not Acceptable)  87 Steret Address (P.O. Box Number is Not Acceptable)  88 Steret Address (P.O. Box Number is Not Acceptable)  89 Steret Address (P.O. Box Number is Not Acceptable)  80 Steret Address (P.O. Box Number is Not Acceptable)  81 Steret Address (P.O. Box Number is Not Acceptable)  82 Steret Address (P.O. Box Number is Not Acceptable)  83 Steret Address (P.O. Box Number is Not Acceptable)  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 697 (0502 and 697.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered office or registered adentified the acceptable of the corporation is 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  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. NAME  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. Intel  15. DAME  16. STERET ADDRESS  16. STERET ADDRESS  17. STEPP  18. DAMBER SACH BLVD.  18. STERET ADDRESS  18. STERET ADDRESS  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIREC	Zîp	Country	<b>⊢</b>	<del>-</del> 1	ry		ent year Inta		<del>\</del>
BROWN, LENTON A., JR.  830 BEACH BLVD  JACKSONVILLE BEACH FL 32250  84 City	24			0					Mino
BROWN, LENTON A., JR. 33 DEACH BLVD JACKSONVILLE BEACH FL 32250  84 City FL 85 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 director's. I hereby accept the displacement agent and accept the obligations of Section 607,6505, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. PURSUANT STATEMENT OF THE STATEMEN		9. Name and Address of Current	Registered Agent			10. Name and Address of New R	egistered A	Agent	
830 BEACH BLVD JACKSONVILLE BEACH FL 32250  84				8	1 Name				
### STREET ADDRESS    STREET ADDRESS   S	1	· ·	•	8	2 Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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.e. a familiar with, and accept the obligations of, Section 607,6505, Florida Statutes.  SIGNATURE  3gnuture typed or printed name of registered agent and that if acceptance in a familiar with, and accept the obligations of, Section 607,6505, Florida Statutes.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. OFFICERS AND DIRECTORS  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. TITLE  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. STREET ADDRESS  14. CITY ST. ZP  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONS/CHANG				آ ا		(1000 (1 10) BOX 112	,		
TI. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE PD D DELETE 11 TILE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE PD D DELETE 11 TILE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE SD D DELETE 12 TIME  14. TIME  15. TIME  16. TIME  17. OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TIME  12. OFFICERS AND DIRECTORS IN 12  13. TIME  14. TIME  15. TIME  15. TIME  15. TIME  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TIME  15.	JACI	KSONVILLE BEACH FL 32250		8	3				
TI. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florids Statutes, the above-named corporation submits this statement for the purpose of changing its 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, 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, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE PD D DELETE 11 TILE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE PD D DELETE 11 TILE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ITIE SD D DELETE 12 TIME  14. TIME  15. TIME  16. TIME  17. OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. TIME  12. OFFICERS AND DIRECTORS IN 12  13. TIME  14. TIME  15. TIME  15. TIME  15. TIME  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  15. TIME  15.	ļ			L			****	Tank Time	2-4-
11. Presuant to the provisions of Sections 607 0502 and 607 1508, Findles 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 Florids, such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in am familiar with, and accept the obligations of, Section 607.0505, Florids Statutes.  SIGNATURE    Signature, Typed or preted name of registered agent and the if applicable.   (NOTE: Registered Agent signature required when reinstating)	,			8	4 City		FI	85 Zip C	-ode
office or registered agent, or both, in the State of Hords. Such change was authorized by the corporation's board of director's. I martery accept the appointment as registered agent, or both, in the State of Hords. Such change was authorized by the corporation's board of director's. I martery accept the appointment as registered agent, or both, in the State of Hords. Such change or both displaced agent, or both, in the marter agent and the first agent agent and the first agent and the first agent and the first agent agent and the first agent and the first agent and the first agent agent agent and the first agent agen	11 Purcuant	to the provisions of Sections 607 0502	and 607 1508 Florida Statutes	the abo	ve-named corn	poration submits this statement for the	nurnose of o	changing its	registered
SIGNATURE    Signature   Signa	l office or n	egistered agent, or both, in the State o	of Florida. Such change was auti	honzed b	y tne corporation	on's board of directors. I hereby accep	t the appoin	tment as re	gistered
Signaturus (Propieted Pagent of Propieted Pa	agent. I a	m familiar with, and accept the obligati	ions of, Section 607.0505, Florid	a Statute	es.				Į.
12.	SIGNATURE		7 TOTAL D			of other religions (	DATE		<del></del>
NAME   BROWN, MARILEE B   22 NAME   22 NAME   23 STREET ADDRESS   33 BEACH BLVD.   23 STREET ADDRESS   31 ITLE   Change   Addition					ent signature require			D DIRECTO	RS IN 12
NAME   BROWN, MARILEE B   22 NAME   22 NAME   23 STREET ADDRESS   33 BEACH BLVD.   23 STREET ADDRESS   31 ITLE   Change   Addition						ADDITIONS/CHANGES TO OT	IOLINO AIVI		
NAME   BROWN, MARILEE B   22 NAME   22 NAME   23 STREET ADDRESS   33 BEACH BLVD.   23 STREET ADDRESS   31 ITLE   Change   Addition									
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STREET ADDRESS   CITY-ST-ZIP   Change   Addition   Change   Addition   Change   Addition   Change   Addition	NAME	BROWN, MARILEE B		2.2 NAM	≣				
TITLE   D	STREET ADDRESS	830 BEACH BLVD.		2.3 STR	ET ADDRESS				
TITLE   D	CTY-ST-ZIP	JAX BEACH, FL 00000		2. 4 CITY	-ST-ZIP				
STREET ADDRESS   S30 BEACH BLVD   33 STREET ADDRESS   34 CITY-ST-ZIP   34 CITY-ST-ZIP   34 CITY-ST-ZIP   34 CITY-ST-ZIP   41 TITLE			☐ DELETE	3.1 TITLE				Change	Addition
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C 4 CCT/ CT 7 TD	STREET ADDRESS			6.3 STR	ET ADDRESS				
	CITY-ST-ZIP			6.4 CITY	-ST-ZIP				

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 on an antaciment with an address, with all other like empowered.

SIGNATURE: