

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 559390

FILED
Mar 31, 2004
Secretary of State

Entity Name: BROWN RANCH, INC.

Current Principal Place of Business:

13939 INDRIONRD
FT. PIERCE, FL 34945 US

New Principal Place of Business:

13939 INDRIOR RD
FT. PIERCE, FL 34945 US

Current Mailing Address:

13939 INDRIOR RD.
FT. PIERCE, FL 34945 US

New Mailing Address:

FEI Number: 59-1801929 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FEE, FRANK H., III
401-A S INDIAN RIVER DR
FT PIERCE, FL 34950

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: PD () Delete
Name: BROWN, EDGAR A.,
Address: 13939 INDRIOR RD
City-St-Zip: FT PIERCE, FL

Title: SD () Delete
Name: BROWN, BARBARA LEIN
Address: 13939 INDRIOR RD
City-St-Zip: FT PIERCE, FL

Title: TD () Delete
Name: BROWN, EDGAR R II
Address: 13939 INDRIOR RD
City-St-Zip: FT PIERCE, FL

Title: VP () Delete
Name: BROWN, JOSEPHINE
Address: 13999 INDRIOR RD
City-St-Zip: FT PIERCE, FL

Title: VP () Delete
Name: BROWN, ALEX
Address: 13939 INDRID RD
City-St-Zip: FORT PIERCE, FL 34945

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: () Change () Addition
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 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: EDGAR A BROWN

PD

03/31/2004

Electronic Signature of Signing Officer or Director

_____ Date