2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2005
Secretary of State

DOCUMENT# 583717

Entity Name: GARY BROWN FORD, INC.

Current Principal Place of Business:

19621 MICHIGAN AVE
ODESSA, FL 33556

New Principal Place of Business:

Current Mailing Address:

19621 MICHIGAN AVE
ODESSA, FL 33556

New Mailing Address:

FEI Number: 59-1926246 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BOOTH, STEPHEN
7510 RIDGE RD
HOLIDAY, FL 34668 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:	PD	( ) Delete
Name:	BROWN, GARY V,	
Address:	19621 MICHIGAN AVE.	
City-St-Zip:	ODESSA, FL 33556	
Title:	V	( ) Delete
Name:	HOKANSON, PAULA B.,	
Address:	11633 GOLDEN VALLEY DR	
City-St-Zip:	NEW PORT RICHEY, FL 34654	
Title:	STD	( ) Delete
Name:	BROWN, KATHLEEN N.,	
Address:	19621 MICHIGAN AVE.	
City-St-Zip:	ODESSA, FL 33556	
Title:	D	( ) Delete
Name:	VIKING, LISA B.,	
Address:	13756 DOWLING LN	
City-St-Zip:	ODESSA, FL 33556	
Title:	D	( ) Delete
Name:	HAAS, CHRISTI	
Address:	9139 NILE DR	
City-St-Zip:	NEW PORT RICHEY, FL	

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: GARY V. BROWN PRES 02/25/2005

Electronic Signature of Signing Officer or Director — Date