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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name 605928

(1)

BRAWNER & BRAWNER INSURANCE, INC.

FILED May 05 1998 8:00am Secretary of State



Principal Place of Business Mailing Address			s				
2908 SUN LAKE LOOP		P.O. BOX 951944	P.O. BOX 951944				
APT 102 LAKE MARY FL 32746		LAKE MARY FL 32795	LAKE MARY FL 32795-1944			DO NOT WRITE IN THIS SPACE	
LAKE MARY I	FL 32746	US	US			3. Date Incorporated or Qualified	
**						12/28/1978	j
2. Principal P	lace of Business	2a. Mailing Address				1. FEI Number	Applied For
21		— —	26			59-1894747	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					\$8.75 Additional
22		27				5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State	City & State			Election Campaign Financing	\$5.00 May Be
23	28				Trust Fund Contribution	Added to Fees	
Zip	Country	7 ip	├ ──	untry		B. This corporation owes or has paid the or	
24	25 Name and Address of Cur	rent Registered Agent	30	T		Personal Property Tax due June 30. 10. Name and Address of New Registered	Yes No
9, Name and Address of Current Registered Agent					Name	10, Hame and Address of their Hegisterer	Agont
DOWNER, PAUL W., Jr.							
APT 102				82	Street Ad	dress (P.O. Box Number is Not Acceptable)	
	(E MARY FL 32748			83			
	\L ##\!!!! L UE! TU						
}				84	City	FI	85 Zip Code
11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the a					e-named co	progration submits this statement for the nurnose	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 hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE							
Signature, typed or protect name of registeries aroust annutional applicable (NOT): Registered Ago						* · · · · · · · · · · · · · · · · · · ·	
12.	VSD OFFICERS A	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFICERS AN	· · · · · · · · · · · · · · · · · · ·
TITLE NAME	Br awner, Paul W. Sr.	F" Dereit	111				Change Addition
	2261 DELORAINE TRAIL		1.2 N		I D D D C C C		
STREET ADDRESS	MAITLAND FL				ADDRESS		
CITY-ST-ZIP TITLE	PTD	DELETE	2.1 T	MY-S MF	1.212		Change Addition
NAME	BR AWNER, PAUL W JR	2	2.2 h				
STREET ADDRESS	2808 SUN LAKE LOOP, AP	T 102	1		ADDRESS		
CITY-ST-ZIP	LAKE MARY FL	, ,,,,		CITY - S			
TITLE		DELETE	3.1 1				Change Addition
NAME			3.2 N	IAME			-
STREET ADDRESS			3.3 S	TREET	ADDRESS		
CITY-ST-ZIP			3.4. (CITY-S	IT-ZIP		
TITLE		DELETE	4.11				Change Addition
NAME			4.21	NAME			
STREET ADDRESS			4.3 S	TREET	ADDRESS		
CITY-\$1-ZIP			4.4 C	ITY-S	T-ZIP		
TITLE		DELETE	5.1 T	ITLE	7		☐ Change ☐ Addition
NAME			5.2 N	IAME			
STREET ADDRESS			5.3 \$	TREET	ADDRESS		
CITY-ST-ZIP				ITY-S	T-ZIP	- <u>-</u>	
TITLE		☐ DELETE	617	ITLE			Change Addition
NAME	•		6.2 N				
STREET ADDRESS	. 1		6.3 S	TREET.	ADDRESS		
CITY-ST-ZIP	- A/I		6.4 C	ITY-\$	T-ZiP		

led with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information the information the information to the same legal effect as if made under eath; that I am an a receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in