2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 13, 2006 08:00 AM Secretary of State

DOCUMENT # 855880 1. Entity Name BROWN ASSOCIATES OF TENNESSEE, INC.					Secre	tary of	State
Principal Plac	e of Business	Mailing Address		1			
819 BROAD CHATTANOO	STREET GA, TN 37402	PO BOX 11507 CHATTANOOGA, TN 37401	บร	1 (88/8) (8/8)		EK ANGA GIBK BIBK BIBK	\$\ 0 \\\$\$ 1 \$\\\$\$
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DO NOT WRITE IN THIS SPA			CE	4. FEI Numbe 62-080		<u> </u>	Applied For Not Applicable
				5. Certificate	of Status Desired	□ \$8.75 / Fee Requ	
	6. Name and Address of Current R	egistered Agent	-				
CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324					NOT WF		- ·
CANIAII	ON, FL 30324			IN 7	THIS SPA	ACE	
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
· - .	Signature, typed or printed name of registered agent an	1 (NOTE Register	red Agent signature require	o when reinstably)		DATE	
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 7 Trust Fund Contribution				.00 May Be ded to Fees			
10.	OFFICERS AND O	RECTORS					
title Name Street Address	CHTD BROWN, EDWARD E., JR. 819 BROAD STREET				0000004 03/21/08-8	163280 163280	150.00
CITY-ST-ZIP	CHATTANOOGA, TN 37402 P/D		-		03/21/00 (יים ממממי	tan + da
name Street address	BROWN, ALLEN C. 819 BROAD STREET						٠.
CITY-ST-ZIP TITLE	SD SD		1 .		1 2 2 34		
Name Street address City-St-Zip	BROWN, ESTHER A. 819 BROAD STREET CHATTANOOGA, TN 37402	· · · · · · · · · · · · · · · · · · ·		DO	NOT WE	RITE	
NAME	BROWN, C. HUXLEY			IN THIS SPACE			
STREET ADDRESS CITY-ST-2IP	819 BROAD STREET CHATTANOOGA, TN 37402		1				
TITLE NAME STREET ADDRESS	,					•	
CITY-ST-ZIP			4				
NAME STREET ADDRESS				. •		•	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.