

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2007 8:00 am
Secretary of State

02-16-2007 90043 006 ***150.00



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1. Entity Name
TINGUE, BROWN & CO.

Principal Place of Business
**535 NORTH MIDLAND AVENUE
 SADDLE BROOK NJ 07662**

Mailing Address
**535 NORTH MIDLAND AVENUE
 SADDLE BROOK NJ 07662**



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE CR2E034 (10/06)

City & State

City & State

4. FEI Number **13-1734394**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MCINTOSH, PATTY
 2450 AVENUE E SW
 WINTER HAVEN FL 33880**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be
 Trust Fund Contribution. **Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PD** Delete
 NAME **TINGUE, WILLIAM J**
 STREET ADDRESS **535 NORTH MIDLAND AVENUE**
 CITY-ST-ZIP **SADDLE BROOK NJ 07662**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **VAS** Delete
 NAME **HURST, JOHN L**
 STREET ADDRESS **535 NORTH MIDLAND AVENUE**
 CITY-ST-ZIP **SADDLE BROOK NJ 07662**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **P** Delete
 NAME **TINGUE, DAVID M**
 STREET ADDRESS **535 NORTH MIDLAND AVENUE**
 CITY-ST-ZIP **SADDLE BROOK NJ 07662**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **BIRD, RICHARD K**
 STREET ADDRESS **535 NORTH MIDLAND AVENUE**
 CITY-ST-ZIP **SADDLE BROOK NJ 07662**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **D** Delete
 NAME **KANDRAVY, JOHN**
 STREET ADDRESS **535 NORTH MIDLAND AVENUE**
 CITY-ST-ZIP **SADDLE BROOK NJ 07662**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: John L Hurst **John L Hurst** 2/2/07 201-796-4490
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #