2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F03000003181

Entity Name: BROOKS EQUIPMENT COMPANY, INC.

FILED Feb 12, 2008 Secretary of State

10926 DAVID TAYLOR DRIVE CHARLOTTE, NC 28262

Current Mailing Address: New Mailing Address:

P O BOX 481888 CHARLOTTE, NC 28269

FEI Number: 88-0161234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FISCHER, RICHARD WHS MGR
4215 S.W. 34TH STREET
ORLANDO, FL 32811 US
SILVA, ROBERT
4215 S.W. 34TH STREET
ORLANDO, FL 32811 US
ORLANDO, FL 32811 US

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: ROBERT SILVA 02/12/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DCFO () Delete Title: D (X) Change () Addition Name: SMITH, ERIC SMITH, ERIC

 Name:
 SMITH, ERIC
 Name:
 SMITH, ERIC

 Address:
 10926 DAVID TAYLOR DR
 Address:
 10926 DAVID TAYLOR DR

 City-St-Zip:
 CHARLOTTE, NC 28262
 City-St-Zip:
 CHARLOTTE, NC 28262

Title: PTS () Delete Title: P (X) Change () Addition

Name: SMITH, ERIC Name: FOUGHTY, TIM

Address: 10926 DAVID TAYLOR DR Address: 10926 DAVID TAYLOR DR City-St-Zip: CHARLOTTE, NC 28262 City-St-Zip: CHARLOTTE, NC 28262

Title: DCEO () Delete Title: () Change () Addition

 Name:
 FAIRCLOUGH, RICHARD J
 Name:

 Address:
 10926 DAVID TAYLOR DR
 Address:

 City-St-Zip:
 CHARLOTTE, NC 28262
 City-St-Zip:

 Title:
 () Delete
 Title:
 CFO () Change (X) Addition

 Name:
 Name:
 GRICE, LISA M

 Address:
 Address:
 10926 DAVID TAYLOR DRIVE #300

Address: Address: 10926 DAVID TAYLOR DRIVE #:
City-St-Zip: CHARLOTTE, NC 28262 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: LISA M GRICE CFO 02/12/2008