2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000000535

Entity Name: JAMES BROWN CONTRACTING, INC.

FILED Jan 30, 2007 Secretary of State

Current Principal Place of Business:			New Principal P	New Principal Place of Business:	
	PMAN RD. GA 30058				
Current Mailing Address:			New Mailing Add	New Mailing Address:	
6908 CHAPMAN RD. LITHONIA, GA 30058					
FEI Number:	58-1274885	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:					
KING, CARLEY D 104 SEAFOX ROAD ST. AUGUSTINE, FL 32086 US					
	named entity of Florida.	submits this statement for the pur	pose of changing its regis	stered office or registered agent, or both,	
SIGNATURE:					
	Electro	nic Signature of Registered Agent		Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	BROWN, JAM	OAF CLUB DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BROWN, PAT	OAF CLUB DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V (MILLER, JAMI 191 FOREST\ SUWANEE, G	'IEW	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SLAUGHTER, 1540 CARRIN		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	C (LEASURE, BA 30 MIMOSA C OXFORD, GA	OURT	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: BARBARA A. LEASURE C 01/30/2007