<u>.</u> .200	I UNII	FORM BUSII	NESS REPO	RT (UBI	(R) P1907	1 : 3 :
DOCUMENT # F30956					FILED	: :
NOEL BROWN + ASSOCIATES, INC.					01 AUG 20 AM 11: 44	
Principal Place 13725 No. 14	BEAC	H BLYD.	Mailing Address 13725 BEA NO. H Tarkson		TALLAHASSEE ELORIJA TALL	
2. Principal F	Place of Busin	ille, FLA.322	3. Mailing Address	37.22	24 X	
Suite, Apt.			Suite, Apt. #, etc. City & State		DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For	
Zip		Country	Zip	Country	59-203798 Not Applicable 5. Certificate of Status Desired See Required 5. See Required	i
		and Address of Current Re	gistered Agent	Name	7. Name and Address of New Registered Agent	
13	125 E	NOEL S. DEACH BLUD DONVIlle, FLA		Street A	Address (P.O. Box Number is Not Acceptable) 80004589358 -09/15/0101004006 *****150	
8. The above	named entity		ne purpose of changing its		or registered agent, or both, in the State of Florida.	i :-
Tax filing r	equirement a	ble to satisfy its Intangible and elects to do so.	After MAY 1, 20	!! FEE IS \$150. 01 Fee will be \$5	\$550.00 Trust Fund Contribution.	1
Tax filing r	requirement a ria on back)		After MAY 1, 20 Make Check Payab	01 Fee will be \$5	\$550.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
Tax filing r (See criter	PUTS BROW	OFFICERS AND DIE	After MAY 1, 20 Make Check Payab RECTORS Delete	01 Fee will be \$5 le to Departmen	**S55.00 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PVT5 BROWN, CROLTO	
Tax filing r (See criter 11. TITLE NAME STREET ADDRESS	PVTS BROW TO HO SAY. R DC BROW	OFFICERS AND DII OFFICERS AND	After MAY 1, 20 Make Check Payab RECTORS Delete	01 Fee will be \$5 le to Department 12. TITLE NAME STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PVT5 BROWN, CAROLTO 13844 SILWING LANG BEOWN, NOEL 13844 SILKVING LANG BROWN, NOEL 13844 SILKVING LANG BROWN, NOEL	
Tax filing r (See criter) 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PVTS BROW TO HO SAY. R DC BROW	OFFICERS AND DIE OFFICERS AND	After MAY 1, 20 Make Check Payab RECTORS Delete	01 Fee will be \$2 le to Department 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Trust Fund Contribution. \$5.00 May Be Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 PVT5 BROWN, CAROLTO 13844 SILKVING LANG BROWN, NOEL 13844 SILKVING LANG SACKSONVINE, FLA. 32224 Change Addition	
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Pg 282

JULY 19, 2001

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS ANNUAL REPORTS FILINGS

P.O. BOX 1500
TALLAHASSEE, FLA.

SUBJECT: ANNUAL REPORT NOEL BROWN & ASSOCIATES, INC.

CONFIRMING A TELEPHONE CONVERSATION WITH A REPRESENTATIVE FROM YOUR OFFICE JULY 18, 2001, PLEASE FIND ATTACHED A CORRECTED ANNUAL REPORT FORM. OUR BOOKKEEPER WAS ILL THE FIRST OF THE YEAR AND WAS DIAGNOSED WITH CANCER IN MARCH AND PASSED AWAY JUNE, 2001. WE HAVE NOT BEEN ABLE TO LOCATE THE 2001 ANNUAL REPORT ARE ANY LATE NOTICES. IN CHECKING WITH YOUR OFFICE JUST THIS MORNING, A LADY TOLD ME THAT THE LATE NOTICE WAS RETURNED FOR SOME REASON WHICH SHE COULD NOT DETERMINE.

IF YOU HAVE ANY QUESTIONS REGARDING THIS APPLICATION, PLEASE CALL ME AT (904)223-4463 OR (904) 821-8690.

RESPECTFULLY,

CAROLYN D. BROWN, PRESIDENT NOEL BROWN & ASSOC., INC.