2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2006
Secretary of State

DOCUMENT# F93000002931

Entity Name: BROWN BUILDERS, INC.

Current Principal Place of Business:

1619 JIMMIE DAVIS HWY
BOSSIER CITY, LA 71112 US

New Principal Place of Business:

Current Mailing Address:

1619 JIMMIE DAVIS HWY
BOSSIER CITY, LA 71112 US

New Mailing Address:

FEI Number: 72-0703966 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 S. PINE ISLAND RD.
PLANTATION, FL 33324 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: DCP ( ) Delete
Name: BROWN, B. WAYNE
Address: 8610 GLENHAVEN
City-St-Zip: SHREVEPORT, LA 71106

Title: DVT ( ) Delete
Name: ROCKETT, KRISTEN B
Address: 2912 LONGLAKE DR
City-St-Zip: SHREVEPORT, LA 71106

Title: D ( ) Delete
Name: BROWN, ELLEN D
Address: 8610 GLENHAVEN
City-St-Zip: SHREVEPORT, LA 71106

Title: DSV ( ) Delete
Name: BROWN, JAMES DOUGLAS
Address: 5009 FELICIANA DRIVE
City-St-Zip: BOSSIER CITY, LA 71112

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: B. WAYNE BROWN DCP 01/13/2006

Electronic Signature of Signing Officer or Director Date