## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

78765

DOCUMENT # F95000000855 (5) or The Brown Schools of Florida, Inc.

Principal Place of Business h Avenue

Pembroke Pines, Fl 33025

Mailing Address Box 4008 Austin, Texas

## FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90072 012 \*\*\*150.00

						DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qualifed				
						02/21/1995				
2. Principal Place of Business	iling Address	•			4. FEI Number			Applied For	]	
21	26					74-2334896			Not Applicable	
Suite, Apt. #, etc.						5. Certifcate of Status Desired			5 Additional Required	
City & State City & State						C 51-41-0			· · · · · · · · · · · · · · · · · · ·	$\exists \Box$
23	28					Election Campaign Financing     Trust Fund Contribution			May Be	
Zip Country		Zip Country				8. This corporation owes the currer	t vear inta			1
24 25	29	3	0			Personal Property Tax.		X Yes	□No	
9. Name and Address of Curre				_		10. Name and Address of New Re	gistered A	gent		1
CT Corporation System				81 Name				-		1
1200 South Pine Island Road				82 Street Address (P.O. Box Number is Not Acceptable)						4
Plantation, Fl 33324				82 Street Address (P.O. Box Number is Not Acceptable)						
			8	33						1
			8	34	City			<b>85</b> Zi	p Code	-
11. Pursuant to the provisions of Sections 607.050	00 1 007 11	FRR Florida Chabata	44			-Air	<u> FL</u>	<u>                                     </u>	itait	4
office or registered agent, or both, in the State agent. I am familiar with, and accept the obligation	of Florida, S	uch change was auth	norized b	by th	he corporation	's board of directors. I hereby accept	the appoint	manging tment as	registered	
SIGNATURE			o Diatar							
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Regis				gistered Agent signature required		<u> </u>	DATE			- 6
2. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFI	CERS AND			-  5
TITLE PD		☐ DELETE	1.1 TITLS					☐ Chang	e	1
NAME   Latimer, Dennis			1.2 NAMI	_						3
STREET ADDRESS 1407 W. Stassney					ADDRESS					ļ
CITY-ST-ZIP Austin, Texas 7874	15		1.4 CITY		ZIP					J è
VPS		☐ DELETE	2.1 TITLE	E				Chang	e 🗌 Addition	1,
NAME Waddill, Gregg			2.2 NAMI	E	İ					
STREET ADDRESS 1407 W. Stassney			2.3 STRE	EETA	LODRESS					
CITY-ST-ZIP - Austin, Texas 7874	1.5		2. 4 CITY	/-ST-	ZIP -		·			_
TITLE VPT		☐ DELETE	3.1 TITLE	E				☐ Chang	e 🔲 Addition	
Herring, Gregory	-4	والمستحددة المعادة	.3.2 NAMI	E	~ <del></del>	المراج المتحالية	-		والمستندة ومعرون فيوارسند	جند ا ـــ
STREET ADDRESS 1407 West Stassney			3.3 STRE	EETA	DORESS					
	ור		3.4. CITY	-ST-	ZIP					
TITLE Austin, Texas 7874	13	☐ DELETE	4.1 TITLE	=				☐ Chang	e 🔲 Addition	1
NAME			4. 2 NAM	tE.						
STREET ADDRESS			4.3 STRE	ETA	DORESS					
CITY-ST-ZIP			4.4 CITY-	-\$T-2	ZIP					
TITLE		☐ DELETE	5.1 TITLE	:				Change	e Addition	]
NAME		ı	5.2 NAME	E						
STREET ADDRESS			5.3 STRE	ET A	DDRESS					
CITY-ST-ZIP			5.4 CITY-		ZIP					1
TITLE		☐ DELETE	6.1 TITLE					☐ Change	Addition	1
NAME			6.2 NAME	E	-					
STREET ADDRESS			6.3 STRE	ETA	DDRESS					
CITY-ST-ZIP		i	6.4 CITY-	ST-Z	ZIP					

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** 

Gregory Herring

IAME OF SIGNING OFFICER OR DIRECTOR

4/9/99

(512) 464-0239

Daytime Phone i