

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F95000003342 (1)

1. Corporation Name

BROOKS AND ASSOCIATES, INC.



Principal Place of Business

Mailing Address

1116 CRYSTAL DR
PALM BEACH GARDENS FL 33418

1116 CRYSTAL DR
PALM BEACH GARDENS FL 33418

3. Date Incorporated or Qualified

07/10/1995

3a. Date of Last Report

Initial

2. Principal Place of Business

2a. Mailing Address

21 57 St. George Place

26 57 St. George Place

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Palm Beach Gardens, FL

28 Palm Beach Gardens, FL

Zip 33418

Country

Zip 33418

Country

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROOKS, DONALD R
1116 CRYSTAL DR
PALM BEACH GARDENS FL 33418

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)
57 St. George Place

83

84 City

Palm Beach Gardens, FL

85 Zip Code

33418

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature typed or printed name of registered agent and the corporation

(Date) Registered Agent Signature required when replacing

(Date)

12. OFFICERS AND DIRECTORS

TITLE	DCP	<input type="checkbox"/> DELETE
NAME	BROOKS, DONALD R	
STREET ADDRESS	1116 CRYSTAL DR	
CITY-STATE-ZIP	PALM BEACH GARDENS FL 33418	
TITLE	S	<input type="checkbox"/> DELETE
NAME	DOUGHERTY, JAMES R	
STREET ADDRESS	25570 HUNT CLUB BLVD	
CITY-STATE-ZIP	FARMINGTON HILLS MI 48335	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-STATE-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

1. TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2. NAME	
3. STREET ADDRESS	57 St. George Place
4. CITY-STATE-ZIP	
5. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6. NAME	
7. STREET ADDRESS	
8. CITY-STATE-ZIP	
9. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
10. NAME	
11. STREET ADDRESS	
12. CITY-STATE-ZIP	
13. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
14. NAME	
15. STREET ADDRESS	
16. CITY-STATE-ZIP	
17. TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
18. NAME	
19. STREET ADDRESS	
20. CITY-STATE-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James R. Dougherty 5/11/96 810-539-9100

(Date)

Daytime Phone #

CR2E034 (12/95)