

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# F95000006319

Entity Name: BROWN JORDAN COMPANY

FILED
Oct 08, 2007
Secretary of State

Current Principal Place of Business:

9860 GIDLEY STREET
EL MONTE, CA 91731 US

New Principal Place of Business:

Current Mailing Address:

475 WEST TOWN PLACE
SUITE 201
ST. AUGUSTINE, FL 32092 US

New Mailing Address:

FEI Number: 59-0912668 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS ST
TALLAHASSEE, FL 32301 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

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MORIARTY, GENE
Address: 1801 N ANDREWS AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: V () Delete
Name: TORTORICI, VINCENTE A JR
Address: 1801 N ANDREWS AVE
City-St-Zip: POMPANO BEACH, FL 33069

Title: D () Delete
Name: POWELL, EARL W
Address: 2665 SO BAYSHORE STE 800
City-St-Zip: MIAMI, FL 33133

Title: D (X) Delete
Name: KOEHN, ROBERT W
Address: 2655 S BAYSHORE STE 800
City-St-Zip: MIAMI, FL 33133

Title: S (X) Delete
Name: GERSHMAN, DAVID
Address: 2655 S BAYSHORE STE 800
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MORIARTY, GENE
Address: 475 WEST TOWN PLACE #201
City-St-Zip: ST AUGUSTINE, FL 32092

Title: T (X) Change () Addition
Name: TORTORICI, VINCENTE A JR
Address: 475 WEST TOWN PLACE #201
City-St-Zip: ST AUGUSTINE, FL 32092

Title: S (X) Change () Addition
Name: KING, FRED
Address: 475 WEST TOWN PLACE 3201
City-St-Zip: ST AUGUSTINE, FL 32092

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 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: VINCENT TORTORICI

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10/08/2007

Electronic Signature of Signing Officer or Director

Date