## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F99000001211

Entity Name: BROWN VEL, INC.

FILED Apr 19, 2007 Secretary of State

	rincipal Place	of Business:	New Principal Place	of Business:
SUITE 120		REET		
BALTIMOF	RE, MD 21202			
Current M	lailing Address	s:	New Mailing Address	s:
SUITE 120	LOMBARD STI 00 RE, MD 21202	REET		
FEI Number:	: 52-2146429	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:
95 S. 1ÓTH HAINES C	ITY, FL 33844	US	nurness of changing its registers	d office or registered agent or both
	e of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both
SIGNATUR	RE:			
	Electroni	c Signature of Registered Ag	ent	Date
Election Car	npaign Financing	Trust Fund Contribution ( ).		
OFFICERS	S AND DIRECT	ORS:	ADDITIONS/CHANG	ES TO OFFICERS AND DIRECTO
OFFICERS Title: Name: Address: City-St-Zip:	PD () PRUGH, JOHN N	Delete /I D ST. SUITE 1200	ADDITIONS/CHANGI Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition
Title: Name: Address:	PD () PRUGH, JOHN N 300 E. LOMBAR BALTIMORE, MI VD () BANCROFT, PE	Delete  // D ST. SUITE 1200 D 21202  Delete TER E D ST. SUITE 1200	Title: Name: Address:	
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD () PRUGH, JOHN N 300 E. LOMBAR BALTIMORE, MI  VD () BANCROFT, PE 300 E. LOMBAR BALTIMORE, MI  S () RUSSELL, KATH	Delete  D ST. SUITE 1200  21202  Delete TER E D ST. SUITE 1200  21202  Delete HLEEN F D ST. SUITE 1200	Title: Name: Address: City-St-Zip: Title: Name: Address:	( ) Change ( ) Addition

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: TIMOTHY M GISRIEL TRES 04/19/2007