

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G33190

FILED
Feb 25, 2009
Secretary of State

Entity Name: BROWNE CREATIVE ENTERPRISES, INC.

Current Principal Place of Business:

531 REID STREET
SARASOTA, FL 34237 US

New Principal Place of Business:

4698 HIDDEN RIVER RD
SARASOTA, FL 34240 US

Current Mailing Address:

POST OFFICE BOX 5549
SARASOTA, FL 342775549 US

New Mailing Address:

FEI Number: 06-0903275 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGE, EUGENE O ESQ.
2750 RINGLING BLVD.
SUITE 3
SARASOTA, FL 34237 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: P () Delete
Name: BROWNE, ROBERT D
Address: 28 INDIAN HILL ROAD
City-St-Zip: WILTON, CT 06897

Title: VPT () Delete
Name: BROWNE, CHRISTOPHER K
Address: 1005 W GARFIELD DRIVE
City-St-Zip: SIOUX FALLS, SD 57105

Title: S () Delete
Name: BROWNE, SALLY
Address: 8704 WOODBRIAR DRIVE
City-St-Zip: SARASOTA, FL 34238

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: BROWNE, SALLY
Address: 4698 HIDDEN RIVER RD
City-St-Zip: SARASOTA, FL 34240

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: CHRISTOPHER BROWNE

VPT

02/25/2009

Electronic Signature of Signing Officer or Director

Date