2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# G37870

FILED Jan 23, 2012 Secretary of State

Entity Name: BROWN AND ASSOCIATES, INC. - GENERAL INSURANCE -

| Current Principal Place of Business: | | New Principal Place of Business: | | |
|--|----------------------------------|------------------------------------|---|--|
| 6675 SW 90 CT MIAMI, FL 33173 | | | | |
| Current Mailing Address: | | New Mailing Address: | | |
| 6675 SW 90 CT MIAMI, FL 33173 | | | | |
| FEI Number: 59-2283884 | FEI Number Applied For () | FEI Number Not Applicable () | Certificate of Status Desired () | |
| Name and Address of (| Current Registered Agent: | Name and Address of | Name and Address of New Registered Agent: | |
| BROWN, ESTEBAN 6907 SW 115 PL UNIT G MIAMI, FL 33173 US | | | | |
| The above named entity in the State of Florida. | submits this statement for the p | ourpose of changing its registered | d office or registered agent, or both, | |
| SIGNATURE: | | | | |
| Electro | nic Signature of Registered Age | ent | Date | |

OFFICERS AND DIRECTORS:

Title:

 Name:
 BROWN, DONALD

 Address:
 6675 SW 90 CT

 City-St-Zip:
 MIAMI, FL 33173

I hereby 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 all other like empowered.

SIGNATURE: DONALD A. BROWN PRES 01/23/2012