


**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 22, 2008 08:00 AM
Secretary of State

DOCUMENT # H39131 Entity Name ROY BROWN LINCOLN-MERCURY, INC.	
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Principal Place of Business 2121 NW HWY 19 CRYSTAL RIVER, FL 34428 US	Mailing Address % JOHN CRIDER 2121 NW HWY 19 CRYSTAL RIVER, FL 34428 US
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DO NOT WRITE IN THIS SPACE



04012008 No Chg-P CR2E034 (11/05)

4. FEI Number 59-2496917	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**CLARDY, JOHN S III
CRIDER CLARDY LAW FIRM PA
521 W. FORT ISLAND TRAIL STE. A
CRYSTAL RIVER, FL 34429**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000314636 05/08/08-80064-018 150.00
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BROWN, ROY F. 841 N O'BRIAN PT LECANTO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS BROWN, HEIDI 2121 NW HWY 19 CRYSTAL RIVER, FL 34428
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DTVP BROWN, RANDY 841 N O'BRIEN POINT LECNATO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, SUSAN G 841 N O'BRIAN PT LECANTO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROWN, RYAN 841 N O'BRIAN PT LECANTO, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:  **4-16-08** **(352) 795-4981**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #