# 2002 UNIFORM BUSINESS REPORT (UBR)

**FILED**
**Apr 10, 2002 8:00 AM**
**Secretary of State**

DOCUMENT# J74624

**Entity Name:** BROWN BARGE SERVICE, INC.

**Current Principal Place of Business:**

40 AUDUSSON AVENUE
PENSACOLA, FL 325072426

**New Principal Place of Business:**

**Current Mailing Address:**

40 AUDUSSON AVENUE
PENSACOLA, FL 325072426

**New Mailing Address:**

**FEI Number: 59-2863388** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, WARREN T.
40 AUDUSSON AVE
P. O. BOX 12950 (ZIP 35276-2950)
PENSACOLA, FL 32507 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

**This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).**
**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete
Name: BROWN, W.T.,
Address: 1700 OSCEOLA BLVD
City-St-Zip: PENSACOLA, FL 00000

Title: D ( ) Delete
Name: BRYAN, GARY W.,
Address: 4920 RUGBY COURT
City-St-Zip: PENSACOLA, FL

Title: D ( ) Delete
Name: BROWN, S.J.
Address: 600 GAMARRA RD.
City-St-Zip: PENSACOLA, FL

Title: D ( ) Delete
Name: BYRAN, STEVEN M.,
Address: 7614 N POINTE DRIVE
City-St-Zip: PENSACOLA, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition
Name: BROWN, W T
Address: 1700 OSCEOLA BLVD
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Change ( ) Addition
Name: BRYAN, GARY W
Address: 5698 BERRYHILL RD.
City-St-Zip: MILTON, FL 32570

Title: D (X) Change ( ) Addition
Name: BROWN, S.J.
Address: 600 GAMARRA RD.
City-St-Zip: PENSACOLA, FL 32503

Title: D (X) Change ( ) Addition
Name: BRYAN, STEVEN M
Address: 3417 N. 4TH STREET
City-St-Zip: OCEANS SPRINGS, MS 39564

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: W. T. BROWN PD 04/10/2002

Electronic Signature of Signing Officer or Director Date