

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# J93602

FILED
Feb 26, 2007
Secretary of State

Entity Name: LIDDY, BROWN AND ASSOCIATES, INC.

Current Principal Place of Business:

P.O. BOX 2269
MELBOURNE, FL 32902 US

New Principal Place of Business:

3155 W NEW HAVEN AVE
MELBOURNE, FL 32904 US

Current Mailing Address:

P.O. BOX 2269
MELBOURNE, FL 32902 US

New Mailing Address:

FEI Number: 59-2857910 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, KAREN
3843 E. RIVERSIDE DR.
MELBOURNE, FL 32935 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: DPTS () Delete
Name: BROWN, KAREN L.,
Address: 3843 E RIVERSIDE DR
City-St-Zip: MELBOURNE, FL

Title: V () Delete
Name: BROWN, RICHARD P
Address: 3843 E RIVERSIDE DR
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: KAREN L BROWN

PRES

02/26/2007

Electronic Signature of Signing Officer or Director

Date