05-01-2002 91558 041 ***150.00

DOCUMENT # 1. Entity Name

J93715

BROWN BUILDERS OF MARION COUNTY, INC.

Principal Place of Business

Mailing Address

% LEWIS E. BROWN 16210 S.E. 91ST COURT % LEWIS E. BROWN 16210 S.E. 91ST COURT SUMMERFIELD FL 34491

SUMMERFIELD FL 34491 U\$

2. Principal Place of Business

3. Mailing Address



7780	OR MIGHINAY YA	4980 St H19H	WHY 4K						
Suite, Ap	ite, Apt. #, etc. Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
Summ	ERFIELD FL	SummERFIEL	1 FL	4. 1	FEI Number 59-2843292		\rightarrow	pplied For ot Applicable	
34491	Country	34491	Country	5. (Certificate of Status Desired	□ \$8	3.75 Ad e Require	ditional	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
Name A									
BROWN LEWIS E								A manage 1	
•			Street Addr	Street Address (P.O. Box Number is Not Acceptable)					
10210 S.E. 9151 COURT									
SUMMER	FIELD FL 34491				,				
		•	City Su	nmEk	PFIELD	FL	Zip Goo	2/9/	
8. The above	e named entity submits this statement for	the purpose of changing its	registered office or red	nistered and	ent or both in the State of Flo				
SIGNATURE	CRAIG A. Blow	N (3 AB			9/15/0	<u>, 2</u>		
 -			Z S S S S S S S S S S S S S S S S S S S	iquirea when re	ristating)	DATE			
Tax filing	oration is eligible to satisfy its Intangible requirement and elects to do so. sria on back)	FILE NOWÍ! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of Stat		00 State	10. Election Campaign Fin Trust Fund Contribution			May Be	
11.	OFFICERS AND D		12.		DITIONS/CHANGES TO OFF	ICEBE AND DIE	- CTOD	0.151.44	
TITLE	PD	⊠ Delete	TOTLE C	70	A				
NAME	BROWN, LEWIS E.	Delete Sec		Buc 1	Room	×	Change	: Addition	
STREET ADDRESS	16210 S.E. 91ST COURT		STREET ADDRESS	000 SI	- DIGHINAU HZ				
CITY-ST-ZIP	SUMMERFIELD FL		CITY-ST-ZIP	11 100 100 5	L BROWN HIGHWAY 42 RELETS, FL 344	101			
TITLE	V	☐ Delete	TITLE	WIIIIE	KHIEHD, PH SHT				
NAME	BROWN, CRAIG A.	□ Delete	NAME			لــا	Change	Addition	
STREET ADDRESS	16355 S.W. 90TH COURT		STREET ADDRESS						
CITY-ST-ZIP	SUMMERFIELD FL	•	CITY-ST-ZIP						
TITLE	c	☐ Delete			10.1				
NAME =	BROWN, DONNA'M.	Li Delete	= NAMES	FCRETH	n. BROWN) **	Change	☐ Addition	
STREET ADDRESS	16355 S.E. 90TH COURT		STREET ADDRESS	UNNA 50 160 50	HIGHWAY 42				
CITY-ST-ZIP	SUMMERFIELD FL					11101			
TITLE	T	Delete	TITLE	MINITE	RFIELD, FL 3.		0		
NAME	BROWN, JOANN A.	MAN DRIKIE	NAME				Change	Addition	
STREET ADDRESS	16210 S.E. 91ST COURT		STREET ADDRESS						
CITY-ST-ZIP	SUMMERFIELD FL	•	CITY-ST-ZIP						
TITLE	The state of the s	□ Delete							
MARAE		☐ Delete	TITLE				Change	☐ Addition	

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

NAME

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE: C

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

RAIGA ABILDE DIEQU

☐ Delete

☐ Change

Addition