2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K62900

JACKSONVILLE, FL

City-St-Zip:

FILED Jan 07, 2004 Secretary of State

Entity Name: MARILYN G. BROWN, INC. **Current Principal Place of Business: New Principal Place of Business:** 511 STATE ROAD 13 445 STATE ROAD 13, #26 FRUIT COVE, FL 32259 FRUIT COVE, FL 32259 **Current Mailing Address: New Mailing Address:** 1303 WENTWORTH AVE FRUIT COVE, FL 32259 FEI Number: 59-2960766 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BROWN, MARILYN G. 1303 WENTWORTH AVENUE FRUIT COVE, FL 32259 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition BROWN, MARILYN G., Name: Name: 1303 WENTWORTH AVE Address: Address: City-St-Zip: JACKSONVILLE, FL City-St-Zip: () Delete Title: Title: () Change () Addition Name: POOL, RALPH R., Name: 1303 WENTWORTH AVE Address: Address:

City-St-Zip:

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.

Ρ SIGNATURE: MARILYN G. BROWN 01/07/2004