FI	I F NOW: FILL	NG FEE AFT	ER MAY 1 IS	\$550.00	FI	LED	
PROFIT			FLORIDA DEPARTMENT OF STATE		Apr 25 1997 8:00am		
				. Mortham			
Į	ANNUAL REPORT Secreta			ry of State	Secreta	ry of State	
	1997	Contest.	DIVISION OF	CORPORATIONS		2	
DOCUI 1. Corporation		37503	(4)				
BROOK	RESOURCES CC	MPANY				Bigin 54855 Bibin Bibin Bidin 6486 Akal 1991	
<u></u>							
Principal Place of Business Mailing Address					A <b>FUO</b> TOFFE <b>BU</b> E FUTER COMPANY DEFIN OR DUE THE	AIAII NANII AANII MIAIL AINKA NIMIFIANI	
401 11TH STREET 401 11TH STREET STE, 506 STE, 506							
HUNTINGTON	WV 25701	H	IUNTINGTON WV 25701-2	226	3. Date Incorporated or Qualified	3a. Date of Last Report	
<ol> <li>Detection of G</li> </ol>			Adollar Address		05/11/1989	05/28/1996	
2. Principal F 21	lace of Business	26	a. Mailing Address		4. FEI Number 65-0142151	Applied For Not Applicable	
Suite, Apt	#, etc		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 City & State	0	27	City & State		6. Election Campaign Financing	Fee Required	
23		28			Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Count	·	Zip )	Country	8. This corporation has liability for i		
24	9. Name and Addro	29 ass of Current Regi	L	30	Florida Statutes	and the second	
ATK	INS, RANDALL W.			81 Name			
	101 BRADLEY PL #204-A 82 Street Address (P.O. Box Number is Not Acceptable)						
	TE 1510 M BEACH FL 33480			83			
				84 City		B5 Zip Code	
11. Pursuant	to the provisions of Sec	tions 607.0502 and	607.1508. Florida Statut	es, the above-named corr	poration submits this statement for the p	FL B 20 Code	
office or r agent it a	egistered agent, or bot m familiar with, and acc	h, in the State of Flo	rida. Such change was of, Section 607.0505, FI	authorized by the corpora orida Statutes.	poration submits this statement for the p tion's board of directors. I hereby accept	ot the appointment as registered	
SIGNATURE				E: Registered Agent signature requi		DATE	
12.	Signature, typical or ponted nav	DEFICERS AND DIRE		E: Hegistered Agent signature requi	ADDITIONS/CHANGES TO OFFIC		
THE	P		DELETE	1 TITLE		ERS AND DIRECTORS IN 12 (9) Change Addition (6) 8	
NAME STREET ADDRESS	ATKINS, RANDALL 425 WHITAKER BL			1.2 NAME 1.3 STREET ADDRESS		03	
CITY - ST - ZIP	HUNTINGTON WV			1.4 CITY - ST - ZIP			
TITLE			DELETE	2.1 TITLE		Change Addition O	
NAME STREET ADDRESS	ATKINS, BARBARA 425 WHITAKER BL			2.2 NAME 2.3 STREET ADDRESS			
CITY - ST - ZIP	HUNTINGTON CH		·	2.4 CITY-ST-ZIP			
TITLE NAME			L_ DELETE	3 † TITLE 3 2 NAME		Change Addition	
NAME STREET ADDRESS				3.3 STREET ADDRESS			
CITY: ST-ZIF		······································		3.4. CITY - ST - ZIP	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
TITLE			DELETE	4.1 TITLE 4. 2 NAME		Change Addition	
NAME STREET ADDRESS				4.3 STREET ADDRESS			
CITY - S1 - ZiP			······	4.4 CITY-ST-ZIP			
TITLE NAME			DELETE	5.1 TITLE 5.2 NAME		Change Addition	
STREET ADDRESS				5.3 STREET ADDRESS			
CITY-ST-ZIP				5.4 CITY - ST - ZIP	·····		
TITLE			DELETE	6.1 TITLE 6.2 NAME		Change Addition	
NAME STREET ADDRESS				6.3 STREET ADDRESS			
C(TY - ST - Z)P				6.4 CITY - ST - ZIP	11- D		
14. I de herel informatio	by certify that the inform on indicated on this ann officer or dispotent of the	nation supplied with lual report or supple	mis filing does not qual mental annual report is	true and accurate and that	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same lega rt as required by Chapter 607, Florida S	s, i runner certify that the il effect as if made under oath; that	
appears i	in Block 12 or Block 13	if changed or on a	n attachment with an ad	oress.	•	najuros, anu inar my naine	
SIGNAT	URE:	Kaila	( 4) []	WETED-UP/	51, 4/20197	307697-0011	
/	SIGNATUR	TE AND THEED OR PRINT	ED NAME OF BIGNING OFFICE	OR DIRECTOR	Date	Daytime Phone #	

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

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