2004 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # \$87842

1. Entity Name

BROWN REAL ESTATE HOLDINGS, INC.



FILED Apr 01, 2004 08:00 AM Secretary of State

cipal Place of Business

Mailing Address

3015 LAKE ALFRED ROAD 1190 RE WINTER HAVEN, FL 33880 ATLANTA

1190 REGENCY CTR OR ATLANTA, GA 30331



02102004

No Chg-P

CR2E034 (10/03)

4. FEI Number 59-2950368

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

5. Name and Address of Current Registered Agent

RIDER, CHRIS 201 E PINE ST SUITE 801 ORLANDO, FL 32801

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ORLANDO, FL 32801			IN	THIS SPACE
The above named entity submits this statement for the the obligations of registered agent.	purpose of changing its registere	ed office or a	registered agent, or b	oth, in the State of Florida. I am familiar with, and accept
SIGNATURE Signature, typed or printed name of registered agant and title	e d applicable. (NOTE: Registered	i Agent Signalu	e required whon reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees	
IU. OFFICERS AND DIRE	CTORS			
TITLE P NAME BROWN, JOHNNY M STREET ADDRESS 3015 LAKE ALFRED ROAD CITY-ST-ZIP WINTER HAVEN, FL 33881				·
TITLE NAME STREET ADDRESS CITY-ST-ZP				100000100442 04/01/04-80007-019 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		- <u>-</u>	IN THIS SPACE	
TITLE NUME STREET ADDRESS CITY-ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP				
I hereby certify that the information supplied with this indicated on this report or supplemental report is true	filing does not qualify for the exer and accurate and that my signal	mption state ture shall ha	ed in Section 119.07(3 tive the same legal eff	8)(i), Florida Statutes, I further certify that the information ect as if made under oath; that I am an officer or director

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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-23-04

Daytime Phone ≢