2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
05 SEP 15 AM 9:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # L04000046713

1. Entity Name
R.S. & R.C. BROWNE LLC

Principal Place of Business	Mailing Address
8711 PHILIPS HIGHWAY JACKSONVILLE, FL 32202	8711 PHILIPS HIGHWAY JACKSONVILLE, FL 32202

2. Principal Place of Business: 8051 Bayberry Rd
Jacksonville, Fla.
Zip: 32256 Country: USA

3. Mailing Address: Same
Suite, Apt. #, etc.
City & State
Zip Country

09132005 Chg-LLC CR2E083 (10/03)

4. FEI Number: 20-1286046 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent

RAX CO.
50 NORTH LAURA STREET, STE. 3300
JACKSONVILLE, FL 32202

7. Name and Address of New Registered Agent

Name
Street Address (P.O. Box Number is Not Acceptable)
City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Richard L. Browne DATE: 9/13/05
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when changing)

Filing Fee is $50.00
Due by October 1, 2005

Make check payable to Florida Department of State

9. MANAGING MEMBERS / MANAGERS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Browne, Richard S. 8711 Philips Highway Jacksonville, FL 32202	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM Browne, Richard C. 8711 Philips Highway Jacksonville, FL 32202	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete

10. ADDITIONS / CHANGES

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Same 8051 Bayberry Rd Jax. FL 32256	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Same 8051 Bayberry Rd Jax. Fla. 32256	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	300059776053 09/20/05--01023--013 **50.00	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Richard L. Browne 9/13/05 904-739-1312
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #