## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L04000077813

**Current Principal Place of Business:** 

Entity Name: BROWN MANAGEMENT AND INVESTMENTS LLC

FILED Apr 24, 2009 Secretary of State

**New Principal Place of Business:** 

ADDITIONS/CHANGES:

() Change () Addition

3799 OLD BUCK CREEK ROAD LONGS, SC 29568 **Current Mailing Address: New Mailing Address:** 3799 OLD BUCK CREEK ROAD LONGS, SC 29568 FEI Number: 20-2631170 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, LYNNE M BROWN, DAVID A 3799 OLD BUCK CREEK ROAD 3799 OLD BUCK CREEK ROAD LONGS, FL 29568 LONGS, FL 29568 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: DAVID A. BROWN 04/24/2009 Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS:

MGRM ( ) Delete Title:

 Name:
 BROWN, LYNNE M
 Name:

 Address:
 3799 OLD BUCK CREEK ROAD
 Address:

 City-St-Zip:
 LONGS, SC 29568
 City-St-Zip

City-St-Zip: LONGS, SC 29568 City-St-Zip:

Title: MGRM ( ) Delete Title: ( ) Change ( ) Addition
Name: BROWN, DAVID A Name:
Address: 3799 OLD BUCK CREEK ROAD Address:

 Name:
 BROWN, DAVID A
 Name:

 Address:
 3799 OLD BUCK CREEK ROAD
 Address:

 City-St-Zip:
 LONGS, SC 29568
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: DAVID A. BROWN MGRM 04/24/2009