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PROFIT **CORPORATION** ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # M21185**

1. Corporation Name

BROWN ENGINEERING AND CONSTRUCTION COMPANY, INC.

## **FILED** Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90213 021 \*\*\*150.00



Mailing Address 109 WEST FALMETTO ROAD LAKE WORTH FL 33467  2. Mailing Address 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 3. Does incorporated or Qualified 39/27/1985  2. Principal Place of Business 2. A Mailing Address 3. Does incorporated or Qualified 39/27/1985  2. Principal Place of Business 2. A Mailing Address 3. Does incorporated or Qualified 39/27/1985  3. Date incorporated or Qualified 39/27/1983  3. Date incorporated or Qualified 38. Post incorporated or Statute or Statute 3. Date incorporated or Qualified 38. Post incorporation 38. Post incorporation 38. Post incorporation 38. Post incorporation 39/27/1983  39/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/2983  30/27/29833291  30/27/29833291  30/27/29833291  30/27/29833291  30/27/2983291  30/2
LAKE WORTH FL 33467  LAKE WORTH FL 33467  LAKE WORTH FL 33467  2. Principal Place of Business 2. A. Mailing Address 2. Principal Place of Business 3. Date incorporated or Qualifed O9/27/1985  2. Principal Place of Business 2. A. Mailing Address 3. Date incorporated or Qualifed O9/27/1985  2. Principal Place of Business 3. Date incorporated or Qualifed O9/27/1985  2. Principal Place of Business 3. Date incorporated or Qualifed O9/27/1985  2. Principal Place of Business 3. Date incorporated or Qualifed O9/27/1985  3. Date incorporated or Qualifed O9/27/1985  4. FEL Nimber 59-25832291  5. Certificate of Stutus Desired   Res. 75. Authority Fellow Place of Stutus Pla
2. Principal Place of Business   2a. Mailing Address   4. FEIN. Pub   Aprilled For 1992/1/1985   4. Suite, Apt. #, etc.   2a. Suite, Apt. #, etc.   59-25/93291   Mot. Application of Sec. Sec. Sec. Sec. Sec. Sec. Sec. Sec.
2. Principal Place of Business   2a. Mailling Address   3. FEIN Kimber   59-2593291   Not Applicate
2. Principal Place of Business   2a. Mailling Address   3. FEIN Kimber   59-2593291   Not Applicate
Suite, A.Y. #, etc.  City & State  City & State  City & State  City & State  Zip  Courtry  Zip  Country  B, This cryporation ownses the current year intangible person all Property Tax.  All DERSON, MALCOLM  324 DATURA STREET. SUITE #112  WEST PALM BEACH FL 33401  82 Street Ac dress (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Cude  11. Pursuant to the provisions of Scations 607 0502 and 607 1508, Floridas Statues, the above-named corporation submits this statement for the purpose of changing its ragister of dictions registered agent, or both, in the State of Florida. Such change was indivortized by the corporation submits this statement for the purpose of changing its ragister of dictions registered agent, or both, in the State of Florida. Such change was indivortized by the corporation submits this statement for the purpose of changing its ragister of dictions registered agent, and accept the obligations of, Sections 607 d505, Floridas Statues.  SIGNATURE  SIGNATURE  12. OFFICERS ANI: DIRECTORS  13. ADDITIC INSIGHANGES TO OFFICERS INDIDIRECTORS IN THE STO OFFICERS ANI: DIRECTORS
Suite, Apt. #, etc.  22   27   28   City & State  City & State  28   City & State  Zip
City & State 23
City & State  Zip Country  Zip
Zip   Courty   Zip   County   Street Accress (P.O. Box Number is Not Acceptable)   Added to Press   No.
24
9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  ANDERSON, MALCOLM 324 DATURA STREET, SUITE #112 WEST PALM BEACH FL 33401  82 Street Acdress (P.O. Box Number is Not Acceptable)  83  44 City FL 85 Zip C:xde  411. Pursuant to the provisions of Sc ctions 607:0502 and 607:1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its ragister office or registered agent, or both, in the State of Florida. Such change was ruthorized by the corporation submits this statement for the purpose of changing its ragister agent. am familiar with, and accept the obligations of, Section 607:0505, Florida Statutes.  SIGNATURE Signature, typed or printed name or registered agent and title # applicable.  MALE STREET ADDRESS
ANDERSON, MALCOLM 324 DATURA STREET, SUITE #112 WEST PALM BEACH FL 33401  11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the advocement of the purpose of changing its register of office or registered agent, or bo h, in the state of Florida, Such change was inthorized by the corporation submits this statement for the purpose of changing its register of agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS ANT: DIRECTORS  13. ADDITICINS/CHANGES TO OFFICERS AND DIRECTOFS IN TITLE  PCD BROWN, WILLIAM JR.  11. TITLE  PCD BROWN, WILLIAM JR.  12. ADDITICINS/CHANGES TO OFFICERS AND DIRECTOFS IN TITLE  STD DELETE  11. TITLE  NAME  BROWN, PALMETTO RD.  12. STD DELETE  11. STD DELETE  12. TITLE  NAME  BROWN, PATRICIA B.  109 W. PALMETTO RD.  12. STD DELETE  13. STREET ADDRESS  CITY-ST-ZIP  TITLE  NOW. PALMETTO RD.  22. STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  BROWN, PATRICIA B.  109 W. PALMETTO RD.  12. STD DELETE  13. TITLE  109 W. PALMETTO RD.  23. STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  BROWN, KEVIN W.  109 W. PALMETTO RD.  12. NAME  12. NAME  13. STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  BROWN, KEVIN W.  109 W. PALMETTO RD.  12. NAME  12. NAME  13. STREET ADDRESS  14. CITY-ST-ZIP  Change  ACCEPTAGE  ACCE
ANDERSON, MALCOLM 324 DATURA STREET, SUITE #112 WEST PALM BEACH FL 33401  82 Street Acdress (P.O. Box Number is Not Acceptable)  83   Street Acdress (P.O. Box Number is Not Acceptable)  84   City   FL   85   Zip C. ide  85   Zip C. ide  86   City   FL   85   Zip C. ide  87   City   FL   85   Zip C. ide  88   City   FL   85   Zip C. ide  89   City   FL   85   Zip C. ide  80   City   FL   85   Zip C. ide  81   City   FL   85   Zip C. ide  81   City   FL   85   Zip C. ide  82   City   FL   85   Zip C. ide  83   City   FL   85   Zip C. ide  84   City   FL   85   Zip C. ide  85   Zip C. ide  86   City   FL   85   Zip C. ide  86   City   FL   85   Zip C. ide  87   City Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of agent in the purpose of changing its register of the purpose of chan
324 DATURA STREET, SUITE #112 WEST PALM BEACH FL 33401  82 Street Acdress (P.O. Box Number is Not Acceptable)  83  84 City
WEST PALM BEACH FL 33401  83  84 City  FL 85 Zip Cixde  11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent, and familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ADDITIONS/CHANGES IN ADDITIONS/CHA
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or bo h, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  DELETE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN ADDITIONS/CHANGES IN ADD
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the order of the provisions of Sections 607.0502 and 607.1508, Florida Statutes of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE    Signature, typed or printed name of registered agent and title if applicable.   (NOTHE Registered Agent signature required when reinstating)   DATE
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office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of cirectors. I hereby accept the appointment as registered agent, am familiar with, and accept the obligations of, Section 607.0505, Floridal Statutes.  SIGNATURE  Signature. typed or printed name of registered agent, and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIC INS/CHANGES TO OFFICERS /ND DIRECTORS IN ADDITIC INS/CHANGES TO OFFICE IN ADDITIC INS/CHANGES TO OFFICE IN ADDITIC INS/CHANGES TO
SIGNATURE  Signature, typed or printed name of registered agent and title if applicable. (NOT): Registered Agent signature required when reinstating)  DATE  12. OFFICERS AND DIRECTORS  13. ADDITICNS/CHANGES TO OFFICERS AND DIRECTOFS IN ADDITICNS/CHANGES TO OFFICERS AND DIRECTORS AND
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12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS IN ADDITIONS/CHANGES TO OFFICERS AND DIRECTOFS AND DIRECT
DELETE   1.1 TITLE   PCD
NAME BROWN, WILLIAM JR.  STREET ADDRESS  CITY-ST-ZIP  TITLE STD DELETE 21 TITLE NAME BROWN, PATRICIA B.  STREET ADDRESS CITY-ST-ZIP LAKE WORTH FL 22 NAME 22 NAME 23 STREET ADDRESS CITY-ST-ZIP  TITLE VD DELETE 31 TITLE DELETE 32 STREET ADDRESS CITY-ST-ZIP  TITLE NAME BROWN, KEVIN W.  STREET ADDRESS
109 W. PALMETTO RD.
CITY-ST-ZIP
TITLE         STD         DELETE         2.1 TITLE         Change         AC           NAME         BROWN, PATRICIA B.         22 NAME  <
NAME
STREET ADDRESS   109 W. PALMETTO RD.   2.3 STREET ADDRESS
CITY-ST-ZIP         LAKE WORTH FL         2.4 CITY-ST-ZIP           TITLE         VD         DELETE         3.1 TITLE         DChange         AC           NAME         BROWN, KEVIN W.         3.2 NAME         3.2 NAME           STREET ADDRESS         109 W. PALMETTO RD.         3.3 STREET ADDRESS
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TITLE DELETE 5.1 TITLE Change A
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DELETE   6.1 TITLE   Change   Ac
NAME 62 NAME
STREET ADDRESS 6 3 STREET ADDRESS
CITY-ST-ZIP 6.4 CITY-ST-ZIP

14. 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 curtify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

4/17/99 561. 967. 0523