

5-14-98 B 7299 C  
**FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00**

**FILED**  
**May 14 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT **1998**



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # M48369 (6)**

1. Corporation Name  
**R.A. BROWN & SON., ELECTRIC CO., INC.**



Principal Place of Business Mailing Address

**C/O RICHARD A. BROWN  
 1407 SW BILTMORE ST  
 PORT ST LUCIE FL 34983**

**C/O RICHARD A. BROWN  
 1407 SW BILTMORE ST  
 PORT ST LUCIE FL 34983**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified  
**03/16/1987**

21	22	23	24	25	26	27	28	29	30	4. FEI Number	Applied For
										<b>59-2785148</b>	Not Applicable
2. Principal Place of Business					2a. Mailing Address					5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>265 SW Port St Lucie Blvd</b>					<b>265 SW Port St Lucie Blvd</b>					<input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
Suite, Apt. #, etc <b>Suite 202</b>					Suite, Apt. #, etc. <b>202</b>					6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	
City & State <b>Port St Lucie Fla</b>					City & State <b>Port St Lucie Fla.</b>					8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Zip <b>34984</b>					Country <b>St Lucie</b>						
Zip <b>34984</b>					Country <b>ST Lucie</b>						

9. Name and Address of Current Registered Agent

**BROWN, RICHARD A.  
 1407 SW BILTMORE ST  
 PORT ST LUCIE FL 34983**

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Richard A. Brown Pres.* **4/29/98**

Signature, typed or printed name of registered agent. (and title if applicable) (NOT: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PVS</b> <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BROWN, RICHARD A.</b>	1.2 NAME	
STREET ADDRESS	<b>1407 SW BILTMORE ST</b>	1.3 STREET ADDRESS	<b>265 SW Port St Lucie Blvd</b>
CITY-ST-ZIP	<b>PT ST LUCIE FL</b>	1.4 CITY-ST-ZIP	<b>Port St Lucie Fla. 34984</b>
TITLE	<b>TD</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>BROWN, RICHARD A.</b>	2.2 NAME	
STREET ADDRESS	<b>1407 SW BILTMORE ST</b>	2.3 STREET ADDRESS	<b>Suite 202</b>
CITY-ST-ZIP	<b>PT ST LUCIE FL</b>	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 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 certify 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, on an attachment with an address.

SIGNATURE: *Richard A. Brown* **4/29/98** **Per 18071041-1147**

CR2E034 (10/97)