## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000011031

FILED Apr 29, 2008 Secretary of State

Entity Name: THE CRAIG & VICKI BROWN FAMILY FOUNDATION, INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
SWEETWA	ALLEY DRIVE ATER SQUAR DD, FL 32779	E STE 102			
Current Mailing Address:			New Mailing Addı	New Mailing Address:	
SWEETWA	ALLEY DRIVE ATER SQUAR DD, FL 32779	E STE 102			
FEI Number:	16-1689348	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
900 FOX V SWEETWA LONGWOO	ATER LAW OF ALLEY DRIVE ATER SQUAR DD, FL 32779	E STE 102 US			
in the State		submits this statement for the pu	rpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electron	ic Signature of Registered Ager	ıt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D () BROWN, CRAIG 39 KEELER'S F WILTON, CT 0	RIDGE ROAD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	D () BROWN, VICKI 39 KEELER'S F WILTON, CT 0	RIDGE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D ( ) BROWN, CHRIS 39 KEELER'S F WILTON, CT 0	RIDGE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BROWN, JENN 39 KEELER'S F WILTON, CT 0	RIDGE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D () BROWN, JEFFI 39 KEELER'S F WILTON, CT 0	RIDGE ROAD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	BEARDSLEE, F	ODWARD STE 210	Title: Name: Address: City-St-Zip:	() Change () Addition	

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 or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT L. BEARDSLEE DIR 04/29/2008