2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jul 14, 2004 8:00 am Secretary of State

DOCUMENT # P00000022731 1. Entity Name THE BROOKS COMPANY								05-06-	2004 901€	57 002 **	*150.00
Principal Place 21044 WOLF MT. DORA, FL	BRANCH RD		Mailing Address 21044 WOLFBRANCH RD. MT. DORA, FL 32757		. ,		•	42991		? (18 1 11 18 2
2. Principal Pl	ace of Busin	ess	3. Mailing Address			-					
Suite, Apt. #, etc. 9			Suite, Apt. #. etc.			0430	2004	Chg-P	CR2E0	34 (10/03)	
City & State			City & State				Number 9-3632	133			plied For Applicable
Zip	Country		Zip Coun		liy	5 . Ce	rtificate o	f Status Desire	d 🖸	\$8.75 Add Fee Required	
	6. Name	and Address of Current	Registered Agent		7. Name and Address of New Registered Agent						
LEVIN, PA 21044 WO MT. DORA		Name Street Address (P.O. Box Number is Not Acceptable)									
}					City				FL	Zip Cod	e
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 Signature, speed or privide name or registered agent and title if applicable (Applicable (NOTE: Registered Agent signature induced when restricting) DATE											
FILE NOWILI FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution.											
10.	ID:	OFFICERS AND		11.		ADD	IIIONS/C	HANGES TO	OFFICERS AND		Addition
TITLE NAME							5. GE	DRGE T	JR.	Change	E Acciden
STREET ADDRESS 21044 WOLFBRANCH RD. CITY ST-ZIP MT, DORA, FL 32757						21044 Mt D		ORGE T OLFBRA FL 3		•	
MILE	VP !		☐ Delete	tat		<i>//L1 2</i>	<i></i>	<u>, </u>	<u> </u>	Change	Addition
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TITLE	s		Dolets	TITL	ξ					Change	Addition
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CITY-ST-ZIP	1	DORA, FL 32757			-ST-ZIP						
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CITY-ST-ZIP		DORA, FL 32757		cin	-ST-ZIP	9					
TITLE			☐ Delete	fitt	E 44	DeTo	rrès	Lito		Change	Addition
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ITLE			Detete	TITL		; - }	,			Change	Addition
NAME STREET ADDRESS				NAA STR	EET ADDRESS	•					
CITY - ST - ZIP	<u> </u>		·		(-S1- ZIP				**		• • • • • • • • • • • • • • • • • • • •
12. I hereby certify that the information supplied with this filling 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 or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 807, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, without other like empowered.											
SIGNATURE: DISTRICTION DISTRIC											

Affachment
THE BROOKS COMPANY 66429912

21044 Wolfbranch Road · Mt. Dora, FL 32757 · (352) 383-5758 · fax (352) 383-2305

July 6, 2004

The Division of Corporations
PO Box 6327
Tallahassee FL 32314

RE: Document #P00000022731

Dear Sirs:

We are in receipt of the above referenced document, Notice of Intent to Dissolve.

Please be advised that our annual filing report and a check for \$150 was mailed in a timely manner. A copy of the original annual filing report was returned to us for correction. The report was corrected and the document was returned to the State of Florida, in a timely manner. Enclosed you will find a copy of the corrected document.

Please waive all late fees and keep our corporation active.

Sincerely.

Patti Levin Secretary

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Enclosure