

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 06, 2002 8:00 am
Secretary of State

05-06-2002 90088 025 ***150.00

DOCUMENT # P01000065448

1. Entity Name
CHRIS J BROWN INC.

Principal Place of Business
1335 LESLIE DR.
MERITT ISLAND FL 32925

Mailing Address
1335 LESLIE DR.
MERITT ISLAND FL 32925



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
3881 N US 1

3. Mailing Address
3881 N US 1

Suite, Apt. #, etc.

City & State
Cocoa, FL

City & State
Cocoa, FL

4. FEI Number
59-3739261

Applied For
 Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

Zip
32926

Country
US

Zip
32926

Country
US

6. Name and Address of Current Registered Agent
BROWN, CHRIS
1335 LESLIE DR.
MERITT ISLAND FL 32925

7. Name and Address of New Registered Agent
 Name
Brown, Chris
 Street Address (P.O. Box Number is Not Acceptable)
3881 N US 1
 City
Cocoa **FL** Zip Code
32926

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.

SIGNATURE **CHRIS BROWN** **4-23-02**
 (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐ (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

11. OFFICERS AND DIRECTORS			12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	DP	<input checked="" type="checkbox"/> Delete	TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, CHRIS		NAME	Brown, Chris	
STREET ADDRESS	1335 LESLIE DR.		STREET ADDRESS	3881 N US 1	
CITY-ST-ZIP	MERITT ISLAND FL 32925		CITY-ST-ZIP	Cocoa FL 32926	
TITLE	DVST	<input checked="" type="checkbox"/> Delete	TITLE	DVST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, MARY		NAME	BROWN, MARY	
STREET ADDRESS	1335 LESLIE DR.		STREET ADDRESS	3881 N US 1	
CITY-ST-ZIP	MERITT ISLAND FL 32925		CITY-ST-ZIP	Cocoa FL 32926	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE **MARY BROWN** **4-23-02** **321-631-6444**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/01)