

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000114989

FILED
Feb 28, 2002 8:00 AM
Secretary of State

Entity Name: BROWNING INV. INC.

Current Principal Place of Business:

3890 CREEK BED CR
ST CLOUD, FL 34769

New Principal Place of Business:

Current Mailing Address:

3890 CREEK BED CR
ST CLOUD, FL 34769

New Mailing Address:

PO BOX 700308
ST CLOUD, FL 34770

FEI Number: 04-3591011

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWNING, BRENT
3890 CREEK BED CR
ST CLOUD, FL 34769

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BROWNING, BRENT
Address: 3890 CREEK BED CR
City-St-Zip: ST CLOUD, FL 34769

Title: DVP (X) Delete
Name: BROWNING, CECIL
Address: 3744 HENRY S AVE
City-St-Zip: ST CLOUD, FL 34772

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRENT BROWNING

DP

02/28/2002

Electronic Signature of Signing Officer or Director

Date