

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000114989

FILED  
Apr 29, 2003  
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:

4067 S. GOLDENROD RD.  
ORLANDO, FL 32822

## Current Mailing Address:

PO BOX 700308  
ST CLOUD, FL 34770

## New Mailing Address:

2352 LAKE LIZZIE CT.  
ST CLOUD, FL 34771

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:

BROWNING, BRENT  
2352 LAKE LIZZIE CT.  
ST CLOUD, FL 34771

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: BRENT BROWNING

04/29/2003

Electronic Signature of Registered Agent

Date

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: BROWNING, BRENT  
Address: 2352 LAKE LIZZIE CT.  
City-St-Zip: ST CLOUD, FL 34771

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

04/29/2003

Electronic Signature of Signing Officer or Director

Date