2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P02000001142

JENNIFER BROWN CONSTRUCTION CLEAN-UP INC.



Mailing Address

Principal Place of Business 13505 WILD CITRUS ROAD SARASOTA, FL 34240

13505 WILD CITRUS ROAD SARASOTA, FL 34240

FILED Jan 17, 2006 8:00 am Secretary of State

01-17-2006 90230 022 ***150.00

60001829



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

01112006 No Chg-P CR2E034 (11/05)

4. FEI Number 30-0001966 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

| BROWN, JENNIFER S 13505 WILD CITRUS ROAD SARASOTA, FL 34240 8. The above named entity submits this statement for the purpose of changing its registere | | | DO NOT WRITE IN THIS SPACE | | |
|--|---|--|----------------------------|---------------------------------------|------|
| the obligations of registered agent. | | | | | |
| SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE | | | | | |
| orginature, typed or printed realize or registered agent and title in approache. (NOTE: neglistered A | | | | required when reinstating) | DATE |
| | E NOW!!! FEE IS \$150.00 ay 1, 2006 Fee will be \$550.00 | Election Campaign Finan Trust Fund Contribution. | cing | \$5.00 May Be Added to Fees | |
| 10 | OFFICERS AND DIRECT | CTORS | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD BROWN, JENNIFER S 13505 WILD CITRUS ROAD SARASOTA, FL 34240 | | | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD BROWN, JEFFREY L 13505 WILD CITRUS ROAD SARASOTA, FL 34240 | | : : | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | | DO NOT WRITE | |
| TITLE NAME STREET ADORESS CITY-ST-ZIP | | | IN THIS SPACE | | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | | | i | | |
| TITLE NAME | | | | | |

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP