

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000055076

FILED  
Apr 22, 2004  
Secretary of State

Entity Name: BROWN DOG CREATIVE, INC.

**Current Principal Place of Business:**

3854 VALENCIA RD.  
JACKSONVILLE, FL 32205

**New Principal Place of Business:**

4070 HERSCHEL STREET  
5  
JACKSONVILLE, FL 32210

**Current Mailing Address:**

3854 VALENCIA RD.  
JACKSONVILLE, FL 32205

**New Mailing Address:**

4070 HERSCHEL STREET  
5  
JACKSONVILLE, FL 32210

FEI Number: 48-1262066

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

FOSTER, LESLEY S  
3854 VALENCIA RD.  
JACKSONVILLE, FL 32205 US

**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

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FOSTER, LESLEY  
Address: 3854 VALENCIA RD.  
City-St-Zip: JACKSONVILLE, FL 32205

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: FOSTER, LESLEY S  
Address: 4070 HERSCHEL STREET  
City-St-Zip: JACKSONVILLE, FL 32210

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: LESLEY S. FOSTER

PRES

04/22/2004

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date