

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000080362

FILED
Apr 01, 2004
Secretary of State

Entity Name: BRAME & BROWN ENTERPRISES, INC.

Current Principal Place of Business:

3612 SE 12TH AVENUE
UNIT 6
CAPE CORAL, FL

New Principal Place of Business:

Current Mailing Address:

3612 SE 12TH AVENUE
UNIT 6
CAPE CORAL, FL

New Mailing Address:

FEI Number: 11-3646710 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BROWN, DWAYNE
3612 SE 12TH AVENUE
UNIT 6
CAPE CORAL, FL US

Name and Address of New Registered Agent:

BRAME, EDWARD H
1079 MONTANA AVENUE
ENGLEWOOD, FL 34223 US

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: EDWARD H. BRAME

04/01/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSD () Delete
Name: BROWN, DEWAYNE
Address: 3612 SE 12TH AVENUE
City-St-Zip: CAPE CORAL, FL

Title: VTD () Delete
Name: BRAME, EDWARD H
Address: 1079 MONTANA AVENUE
City-St-Zip: ENGELWOOD, FL 34223

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: EDWARD H. BRAME

VTD

04/01/2004

Electronic Signature of Signing Officer or Director

Date