## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000080362

Entity Name: BRAME & BROWN ENTERPRISES, INC.

FILED Jan 21, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

1079 MONTANA AVENUE 1811 ENGLEWOOD ROAD ENGLEWOOD, FL 34223

SUITE 254

ENGLEWOOD, FL 34223

**Current Mailing Address: New Mailing Address:** 

1811 ENGLEWOOD ROAD 1079 MONTANA AVE ENGLEWOOD, FL 34223 SUITE 254

ENGLEWOOD, FL 34223

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

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

BRAME, EDWARD H BRAME, EDWARD H 1079 MÓNTANA AVENUE 361 ARĎENWOOD DRIVE US ENGLEWOOD, FL 34223 SUITE 254 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: 01/21/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete Title: (X) Change ( ) Addition

BROWN, DEWAYNE BRAME, EDWARD H Name: Name:

3612 SE 12TH AVENUE 1811 ENGLEWOOD ROAD, SUITE 254 Address: Address:

City-St-Zip: CAPE CORAL, FL City-St-Zip: ENGLEWOOD, FL 34223

Title: VTD Title: (X) Change ( ) Addition () Delete

Name: BRAME, EDWARD H Name: MICHAELENE, BRAME H

1079 MONTANA AVENUE Address: 1811 ENGLEWOOD ROAD, SUITE 254 Address:

ENGELWOOD, FL 34223 ENGLEWOOD, FL 34223 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 **PSD** 01/21/2008