2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jun 01, 2006 08:00 AM **DOCUMENT # P02000133122 Secretary of State** FIRST BROWNSVILLE COMPANY Principal Place of Business Mailing Address 3800 MOBILE HWY 3800 MOBILE HWY PENSACOLA, FL 32505 PENSACOLA, FL 32505 05302006 No Cha-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 82-0576758 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent HOVANESIAN, ARCHIBALD DO NOT WRITE 16 PORT ROYAL WAY PENSACOLA, FL 32502-5774 IN THIS SPACE 8. 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. I am familiar with, and accept 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) 9. Election Campaign Financing in accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. FILE NOW!!! FEE IS \$150.00 \$5.00 May Be Trust Fund Contribution. Due by September 6, 2006 Added to Fees 10. OFFICERS AND DIRECTORS PRES MLE **BUNTON, ARTHUR CIII** NAME STREET ADDRESS 70 STAR LAKE DR CITY-ST-ZIP PENSACOLA, FL 32507 Unnonnsessia ne/ñ1/ñ6-8ñññ\$-nn2 150.00 TITLE NAME ARCHIBALD, HOVANESIAN ESQUIRE STREET ADDRESS 16 PORT ROYAL WAY PENSACOLA, FL 32502 CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP 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.

STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS CITY-ST-ZIP