

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015420

FILED
Apr 27, 2007
Secretary of State

Entity Name: JOHN C. BROWN INSTALLATIONS, INC.

Current Principal Place of Business:

730 PIERCE ARROW LANE
PIERSON, FL 32180

New Principal Place of Business:

Current Mailing Address:

730 PIERCE ARROW LANE
PIERSON, FL 32180

New Mailing Address:

FEI Number: 06-1687024

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, JOHN C
730 PIERCE ARROW LANE
PIERSON, FL 32180 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: CHAI () Delete
Name: BROWN, THERESA J CHAIRPE
Address: 730 PIERCE ARROW LANE
City-St-Zip: PIERSON, FL 32180

Title: PRES () Delete
Name: BROWN, THERESA J PRESIDE
Address: 730 PIERCE ARROW LANE
City-St-Zip: PIERSON, FL 32180

Title: VICE () Delete
Name: BROWN, JOHN C VICE PR
Address: 730 PIERCE ARROW LANE
City-St-Zip: PIERSON, FL 32180

Title: SECR () Delete
Name: BROWN, JOHN D SECRETA
Address: 730 PIERCE ARROW LANE
City-St-Zip: PIERSON, FL 32180

Title: TREA () Delete
Name: BROWN, JOHN D TREASUR
Address: 730 PIERCE ARROW LANE
City-St-Zip: PIERSON, FL 32180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: THERESA J BROWN

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date