2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P03000046485

1. Entity Name

BROOKS CONSOLIDATED COMPANY



FILED Feb 01, 2007 08:00 AM Secretary of State

Principal Place of Business

1129 ROYAL PALM BLVD STE 72 WEST PALM BEACH, FL 33411 US Mailing Address

1129 ROYAL PALM BLVD STE 72 WEST PALM BEACH, FL 33411 US



DO NOT WRITE IN THIS SPACE

01272007	No Chg-P	CR2E034 (11/05)

4. FEI Number 73-1664564	Applied For Not Applicable	
13-1004004	 Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

CHASE, JEAN A 1129 ROYAL PALM BEACH BLVD STE72 WEST PALM BEACH, FL 33411

DO NOT WRITE IN THIS SPACE

	e named entity submits this statement for the p tions of registered agent.	surpose of changing its register	ea office of f	egistered agent, or oc	oth, in the state of Florida II am familiar t	with, and accept	
SIGNATURE.	Signature, typed or printed name of registered agent and title in	f applicable. (NOTE: Registere	id Agent signaturi	a required when reinstating)	DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finar Trust Fund Contribution	ncing	\$5.00 May Be Added to Fees	000000615235 02/06/07-80063-016	150.00	
10.	OFFICERS AND DIREC	CTORS					
TITLE · NAME STREET ADDRESS CITY-ST-ZIP	V MULLINS, SCOTT 12335 76TH RD N WEST PALM BEACH, FL 33412						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WERNER, JOSEPH II 12335 76TH RD N WEST PALM BEACH, FL 33412						
TITLE NAME STREET ADDRESS CITY-ST+ZIP	ST CHASE, JEAN A 1129 ROYAL PALM BEACHA BLVD STE 72 WEST PALM BEACH, FL 33411			DO NOT WRITE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN '	THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP							

12. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JEAN A. CHASE TREASURER

1/29/07 567-791-8

Daylime