

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000107502

FILED
Apr 02, 2004
Secretary of State

Entity Name: DOELENE R. BROWN, P.A.

Current Principal Place of Business:

1511 BUENOS AIRES BLVD
THE VILLAGES, FL 32159

New Principal Place of Business:

Current Mailing Address:

1511 BUENOS AIRES BLVD
THE VILLAGES, FL 32159

New Mailing Address:

FEI Number: 20-0281275

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, DOELENE R
1511 BUENOS AIRES BLVD
THE VILLAGES, FL 32159

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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPST () Change (X) Addition
Name: BROWN, DOELENE R
Address: 1511 BOENOS AIRES BOULEVARD
City-St-Zip: THE VILLAGES, FL 32159

Title: VP () Change (X) Addition
Name: BROWN, BRAD
Address: 1511 BOENOS AIRES BOULEVARD
City-St-Zip: THE VILLAGES, FL 32159

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: DOELENE R. BROWN

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04/02/2004

Electronic Signature of Signing Officer or Director

Date