2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Mar 16, 2005 8:00 am Secretary of State DOCUMENT # P04000069151 1. Entity Name 03-16-2005 90044 046 ***150.00 **BROWN HILL CORPORATION** Mailing Address Principal Place of Business 6841 67TH STREET CIRCLE EAST 6841 67TH STREET CIRCLE EAST PALMETTO FL 34221 PALMETTO FL 34221 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 - (10/04) 4. FEI Number City & State City & State Applied For umber // - 37/フ/フs Not Applicable Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent VOIGT, STEPHEN F SR Street Address (P.O. Box Number is Not Acceptable) 2042 BEE RIDGE ROAD SARASOTA FL 34239: Zip Code City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!!* FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be ் After May 1, 2005 Fee Will Be \$550.00 🥳 🖔 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State 10, OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE ☐ Addition Change Delete NAME HILL, RANDALL H NAME STREET ADDRESS 6841 67TH STREET CIRCLE EAST STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CITY-57-ZIP Delete THILE ☐ Change ☐ Addition BROWN, DUSTIN R NAME NAME STREET ADDRESS 6841 67TH STREET CIRCLE EAST STREET ADDRESS CITY-ST-ZIP PALMETTO FL 34221 CITY-ST-ZIP TITLE ☐ Change Addition TITLE ☐ Delete NAME HILL, JUDITH A STREET ADDRESS 6841 67TH STREET CIRCLE EAST STREET ADDRESS CITY+SI-7IP CITY-ST-7(P PALMETTO FL 34221 TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition ☐ Delete HILE ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

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12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 of Block 11 if changed, or on an attachment with an address, with all other like empowered. Judith A. Hill 3/12/05 (941)