2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 24, 2006
Secretary of State

DOCUMENT# P05000092052

Entity Name: CHRISTOPHER BROWN & ASSOCIATES, INC.

Current Principal Place of Business:

2010 OAK HAMMOCK DR
PONMTE VERDA BEACH, FL 32082

New Principal Place of Business:

2010 OAK HAMMOCK DR
PONTE VEDRA BEACH, FL 32082

Current Mailing Address:

2010 OAK HAMMOCK DR
PONMTE VERDA BEACH, FL 32082

New Mailing Address:

2010 OAK HAMMOCK DR
PONTE VEDRA BEACH, FL 32082

FEI Number: 42-1673227 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BROWN, CHRISTOPHER
2010 OAK HAMMOCK DR
PONMTE VERDA BEACH, FL 32082 US

Name and Address of New Registered Agent:

BROWN, CHRISTOPHER
2010 OAK HAMMOCK DR
PONTE VEDRA BEACH, FL 32082 US

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: 04/24/2006
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: BROWN, CHRISTOPHER
Address: 2010 OAK HAMMOCK DR
City-St-Zip: PONMTE VERDA BEACH, FL 32082

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change ( ) Addition
Name: BROWN, CHRISTOPHER
Address: 2010 OAK HAMMOCK DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: S/D ( ) Change (X) Addition
Name: BROWN, KAREN
Address: 2010 OAK HAMMOCK DR
City-St-Zip: PONTE VEDRA BEACH, FL 32082

I hereby certify that the information supplied with this filing does not qualify for the 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: D.CHRISTOPHER BROWN P/D 04/24/2006
Electronic Signature of Signing Officer or Director — Date