## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## Jan 10, 2005 08:00 AM **Secretary of State DOCUMENT # P08888** Entity Name BROWNLEE-MORROW ENGINEERING COMPANY, INC. Mailing Address Principal Place of Business PO BOX 380008 7450 CAHABA VALLEY RD PO BOX 380008 PO BOX 380008 BIRMING HAM, AL 35238-008 US BIRMINGHAM, AL 35238-008 US 01032005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 63-0512045 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DO NOT WRITE CT CORPORATION SYSTEM 1200 S. PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE, Registered Agent signalure required when reinstating) DATE 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE MORROW, BETTY M NAME 4216 OLD LEEDSLANE STREET ADDRESS CITY-ST-ZIP BIRMINGHAM, AL ۷Ş TITLE 000000177178 MORROW, MALCOLM A. NAME 01/11/05-80026-016 150.00 2780 PUMPHOUSE RD. STREET ADDRESS BIRMINGHAM, AL CITY - ST - ZIP MORROW, GORDON, JR. NAME STREET ADDRESS 680 ARLINGTON DR. DO NOT WRITE LEEDS, AL CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 by surhature 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 his report as equired 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 ampowered.

Date

Daytime Phone #

OR DIRECTOR

SIGNATURE:

SIGNATURE AND

FILED