FILED
Feb 03, 2006 08:00 AM
Secretary of State

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P92000008859

1. Entity Name
CHRIS BROWNE'S COMIC WORKS, INC.

Principal Place of Business	Mailing Address
531 REID STREET SARASOTA, FL 34242	531 REID STREET SARASOTA, FL 34242

DO NOT WRITE IN THIS SPACE

01302006 No Chg-P CR2E034 (11/05)

4. FEI Number
65-0380343

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

LYONS, ROBERT G
2033 MAIN STREET
SUITE 600
SARASOTA, FL 34237-7

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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 _____ DATE
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
After May 1, 2006 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000418366
02/14/06-80004-017 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	BROWNE, CHRIS
STREET ADDRESS	531 REID ST
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	BROWNE, CARROLL A
STREET ADDRESS	531 REID ST
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	D
NAME	SMITH, ASHLEY L
STREET ADDRESS	531 REID ST
CITY-ST-ZIP	SARASOTA, FL 34242
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. *I hereby certify that the information supplied with this filing 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: Chris Browne Chris Browne 1-31-06 941-346-2568
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #