## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P93000074195

Entity Name: JAMES BROWN JANITORIAL SERVICES, INC.

FILED Jan 29, 2003 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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1509 LONNIE RD.

TALLAHASSEE, FL 32308 US

Current Mailing Address: New Mailing Address:

1509 LONNIE RD. 4214 JULIA ST

TALLAHASSEE, FL 32308 US TALLAHASSEE, FL 32305 US

FEI Number: 59-1869610 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, JAMES JR
BROWN, JOHNNY
1509 LONNIE ROAD
BROWN, JOHNNY
4214 JULIA ST

TALLAHASSEE, FL 32308 TALLAHASSEE, FL 32305

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: JOHNNY BROWN 01/29/2003

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD ( ) Delete Title: CEO (X) Change ( ) Addition

 Name:
 BROWN, JAMES JR
 Name:
 BROWN, JOHNNY

 Address:
 1509 LONNIE RD.
 Address:
 4214 JULIA ST

City-St-Zip: TALLAHASSEE, FL City-St-Zip: TALLAHASSEE, FL 32305

Title: STD () Delete Title: () Change () Addition

 Name:
 BROWN, EDNA M
 Name:

 Address:
 1509 LONNIE RD.
 Address:

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWN, JUAN O
 Name:

 Address:
 1509 LONNIE RD.
 Address:

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:

Title: PD () Delete Title: VPD (X) Change () Addition

 Name:
 BROWN, JOHHNY M
 Name:
 BROWN, JAMES JR

 Address:
 4214 JULIA ST.
 Address:
 1509 LONNIE RD

 City-St-Zip:
 TALLAHASSEE, FL
 City-St-Zip:
 TALLAHASSEE, FL
 32308

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: JOHNNY BROWN CEO 01/29/2003