**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT #** P94000061276 1. Corporation Name

LINDER-BROWN, INC.

## FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90088 039 \*\*\*150.00 08-26-1999 90003 006 \*\*\*150.00



Principal Place	OI BUŞINEŞS	Mailing Address					
8571 S.E. DRIFTWOOD STREET 8571 S.E. DRIFTWOOD S HOBE SOUND FL 33455 HOBE SOUND FL 33455			REET				
HORE SOUND	FL 33455	HUBE SOUND PL 33435			DO NOT WRITE IN THI	S SDACE	1
					3. Date Incorporated or Qualified	3 SFACE	·
					08/19/1994		
2. Principal Pla	Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  City & State  Zip  Country  Zip  9. Name and Address of Current Registered Agent  BROWN, ARNOLD  8571 S.E. DRIFTWOOD STREET  HOBE SOUND FL 33455				4. FEI Number		Applied For
					65-0525967		Not Applicable
					5. Certificate of Status Desired		75 Additional
22							e Required
City & State		— ·			6. Election Campaign Financing Trust Fund Contribution		.00 May Be ded to Fees
Zip	Country	Zip	Count	ry	8. This corporation owes the current year	<b>—</b>	П.,
24			30		Intangible Personal Property.	Yes	No No
	9. Name and Address of Currer	t Registered Agent		41 51	10. Name and Address of New Registere	d Agent	
RRO	NWN. ARNOLD		8	1 Name			
857		8	82 Street Address (P.O. Box Number is Not Acceptable)				
HOE	BE SOUND FL 33455		8	3			
			8	4 City	· F	85	Zip Code
11. Pursuant	to the provisions of sections 607.050	2 and 607.1508, Florida Statutes	, the abov	e-named corp	poration submits this statement for the purpose of	changing	its registered
office or r	registered agent, or both, in the State	of Florida. Such change was au	thorized t	y the corpora	tion's board of directors. I hereby accept the app	ointment a	as registered
SIGNATURE			J+ FM				
			_	Agent signature re	equired when revistating) DATE	ND DIDE	CTORC IN 12
12.	D OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A		<u> </u>
TITLE	- T., _	DELETE	1.1 TITLE			Cha	nge Additio
NAME	BROWN, ARNOLD	ET	1.2 NAME				
STREET ADDRESS	8571 S.E. DRIFTWOOD STREI HOBE SOUND FL 33455			ET ADDRESS			
CITY-ST-ZIP	D DODE SOUND PL 35455		1.4 CITY-		<u> </u>		
TITLE	<del>-</del>	L DELETE	2.1 TITLE	i		L Cha	nge Additio
NAME	Brown, Joan 8571 Se Driftwood St		2.2 NAME				
STREET ADDRESS	"HOBE SOUND FL	بحمنسي ب		ET ADDRESS			-
CITY-ST-ZIP	**HOBE SOUND PL	П	2.4 CITY-			[] Ch-	Additio
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NAME	•						
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NAME .				ET ADDRESS			
STREET ADDRESS							
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		L_) DELETE	6.2 NAME			Cha	inge Add/80
NAME							
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	with that the information cumulad with	this filling does not qualify for the	6.4 CITY-		action 119 07(3)(i) Florida Statutes I further certif	v that the	information
an officer o	or this annual report or supplemental or director of the corporation or the re or Block 13 if changed, or on an att	ceiver or trustee empowered to	te and the execute t	at my signatu nis report as r	action 119.07(3)(i), Florida Statutes. I further certifulate shall have the same legal effect as if made unrequired by Chapter 607, Florida Statutes; and the	der oath; t at my nam レレリ	ne appears

**SIGNATURE:** 

Paul F. Smyth C.P.A.

Darby M. Hauck C.P.A.

William H. Hines C.P.A.

Wanda W. Bergeron C.P.A.

Members
American Institute of
Certified Public Accountants
Florida Institute of
Certified Public Accountants

P94000061276 609631-90003-6

August 13, 1999

State of Florida
Division of Corporations
Annual Reports Filings
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Linder-Brown, Inc.

1999 Corporation Annual Report Document #P9400061276

## Dear Ladies/Gentlemen:

Please be advised that the first Notice for the Corporate Annual Report for Linder-Brown, Inc. was misplaced by my client who was in shock due to the death of her husband Arnold Brown. She has no knowledge of the business or the requirements of the business laws, which were all handled by her husband Arnold Brown.

Enclosed please find a check in the amount of \$150.00 made payable to the Florida Department of Revenue representing the initial filing fee together with the Annual Report. We ask that you respectfully waive the penalty.

Thank you in advance for your consideration in this matter. If you should have any questions, please do not hesitate to contact me.

Sincerely,

Smyth & Hauck, P.A.

Paul F. Smyth

Certified Public Accountant

PFS/tp

August 13brown-corp-waiver.doc