

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P94000067643

FILED
Apr 24, 2008
Secretary of State

Entity Name: H. J. BROWN FLORIDA PROPERTIES, INC.

Current Principal Place of Business:

3101 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406 US

New Principal Place of Business:

Current Mailing Address:

3101 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406

New Mailing Address:

FEI Number: 13-3799369 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BROWN, ALFRED
3101 FOREST HILL BLVD.
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROWN, ALFRED
Address: 3101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VP () Delete
Name: BROWN, MORGAN
Address: 3101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: VPS (X) Delete
Name: OBERLINK, PETER
Address: 461 PARK AVENUE SOUTH, 8TH FLOOR
City-St-Zip: NEW YORK, NY 10016

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: BROWN, ALFRED
Address: 3101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DVPT (X) Change () Addition
Name: BROWN, MORGAN
Address: 3101 FOREST HILL BLVD.
City-St-Zip: WEST PALM BEACH, FL 33406

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: ALFRED BROWN

DPS

04/24/2008

Electronic Signature of Signing Officer or Director

_____ Date