## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P94000091072

FILED Apr 24, 2008 Secretary of State

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

**Current Principal Place of Business: New Principal Place of Business:** 3101 FOREST HILL BLVD. WEST PALM BEACH, FL 33406 **Current Mailing Address: New Mailing Address:** 3101 FOREST HILL BLVD. WEST PALM BEACH, FL 33406 FEI Number: 13-3908518 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, ALFRED 3101 FOREST HILL BLVD. WEST PALM BEACH, FL 33406 US 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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition BROWN, ALFRED Name: Name: BROWN, ALFRED 3101 FOREST HILL BLVD. 3101 FOREST HILL BLVD. Address: Address:

City-St-Zip: WEST PALM BEACH, FL 33406 City-St-Zip: WEST PALM BEACH, FL 33406

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

**VPS** Title: Title: (X) Delete () Change () Addition

OBERLINK, PETER Name: Name: 461 PARK AVENUE SOUTH, 8TH FLOOR Address: Address: City-St-Zip: NEW YORK, NY 10016 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