2001 UNIFORM BUSINESS REPOR页(UBR)

DOCUMENT # **P95000065358**

City & State

CRYSTAL

BROWN, ROBERT L

110 NE BAYSHORE DR **CRYSTAL RIVER FL 34429**

Signature, typed or printed name of registered agent and title if applicable.

9. This corporation is eligible to satisfy its Intangible

BROWN, ROBERT L

BROWN, JUNE T

110 NE BAYSHORE DR

110 NE BAYSHORE DR

CRYSTAL RIVER FL 34429

CRYSTAL RIVER FL 34429

Tax filing requirement and elects to do so.

(See criteria on back)

STD

11,

TITLE NAME

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NAME STREET ADDRESS

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CITY-ST-ZIP

BROWN'S AUTO WORLD INC. Principal Place of Business Mailing Address 9468-S-U-S-HWY-441-DAGS S. U. S. HWY 446 OCALA FL 33480 \ OCALA FL 33480 -2. Principal Place of Business 3. Mailing Address 7700 WGULF TOLAKE HYW 7700 W BULFTO LAKE KYW. Suite, Apt. #, etc. Suite, Apt. #, etc.

6. Name and Address of Current Registered Agent

OFFICERS AND DIRECTORS

City & State

CRYSTAL RIVER, FI

Delete

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City

FILE NOW!!! FEE IS \$150.00

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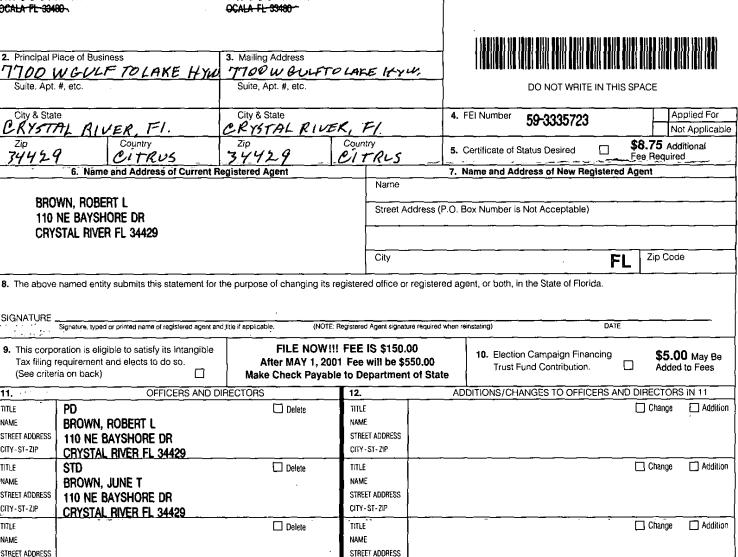
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Apr 23, 2001 8:00 am Secretary of State

04-23-2001 90223 042 ***150.00



13. I hereby certify that the information supplied with this filing does not qualify 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 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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Addition

CR2E034 (10/00)