

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000039528

1. Entity Name

BROWN-HUDGINS & ASSOCIATES, INC.

FILED
May 18, 2000 8:00 am
Secretary of State

05-18-2000 90296 007 ***150.00

Principal Place of Business

Mailing Address

8384 BAYMEADOWS ROAD STE 9
 JACKSONVILLE FL 32256

8384 BAYMEADOWS ROAD STE 9
 JACKSONVILLE FL 32258-3202

2. Principal Place of Business

3. Mailing Address

5200 SIESTA DEL RIO DR.
 Suite, Apt. #, etc.

P.O. Box 57727
 Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

Jacksonville, Florida

City & State

Jacksonville, Florida

4. FEI Number

59-3375956

Applied For

Not Applicable

Zip

32258

Country

USA

Zip

32241

Country

USA

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CORPORATE SERVICE COMPANY
 1201 HAYS STREET
 TALLAHASSEE FL 32301

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☒

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D ☐ Delete
 NAME PALMER, KENNETH
 STREET ADDRESS 8384 BAYMEADOWS RD, #9
 CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☐ Change ☐ Addition
 NAME Palmer, Kenneth W. Sr.
 STREET ADDRESS 5200 SIESTA DEL RIO DR. S.
 CITY-ST-ZIP Jacksonville, Florida 32258

TITLE D ☐ Delete
 NAME HUDGINS, LARRY
 STREET ADDRESS 8384 BAYMEADOWS ROAD STE 9
 CITY-ST-ZIP JACKSONVILLE FL 32256

TITLE D ☐ Change ☐ Addition
 NAME Hudgins, Larry
 STREET ADDRESS 4339 W. ASPEN COVE
 CITY-ST-ZIP Cedar Hills, Utah 84062

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
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TITLE ☐ Change ☐ Addition
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 of Kenneth W. Palmer
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/00 (904) 262-2212
 Date Daytime Phone #

CR2E034 (9/99)