


FILED
Apr 23, 2004 8:00 am
Secretary of State

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DOCUMENT # P96000064485

1. Entity Name
LOUIS H. BROWN BUILDING, INC.



04-23-2004 90206 050 ***150.00

Principal Place of Business
3010 NE 16TH AVE #102
OAKLAND PARK, FL 33334 US

Mailing Address
576 PATTON THICKET ROAD
BURNSVILLE, NC 28714

2. Principal Place of Business
2510 OAKLAND PK BLVD

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
FT. LAUDERDALE, FL

City & State

Zip
33306

Country
USA

Zip

Country

4. FEI Number
65-0738761

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
BROWN, THOMAS R.
2636 NE 27TH COURT
FORT LAUDERDALE, FL 33306

7. Name and Address of New Registered Agent

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	P	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARRISH, DAVID		NAME		
STREET ADDRESS	2951 SOUTHAVERN DRIVE		STREET ADDRESS		
CITY- ST- ZIP	ANNAPOLIS, MD 21401		CITY- ST- ZIP		

TITLE	ST	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HAGY, JANICE P		NAME		
STREET ADDRESS	3010 NE 16TH AVE #102		STREET ADDRESS		
CITY- ST- ZIP	OAKLAND PARK, FL 33334		CITY- ST- ZIP		

TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, SUSAN T		NAME		
STREET ADDRESS	3802 PARKMONT AVENUE		STREET ADDRESS		
CITY- ST- ZIP	BALTIMOR, MD 21206		CITY- ST- ZIP		

TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, STEVEN L		NAME		
STREET ADDRESS	1706 E. COPPER STREET		STREET ADDRESS		
CITY- ST- ZIP	TUCSON, AZ 85719		CITY- ST- ZIP		

TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMROG, NANCY A		NAME		
STREET ADDRESS	3127 N TERRELL PLACE		STREET ADDRESS		
CITY- ST- ZIP	TUCSON, AZ 85716		CITY- ST- ZIP		

TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY- ST- ZIP			CITY- ST- ZIP		

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Janice P. Hagy, Secy/Treas. 4/20/04 (828)675-5898

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #