## FOR PROPIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P.9600064485 1. Entity Name LOUIS H. BROWN BUILDING. INC 2500-2510 E. OAKLAND PARK BLUD. FT. LAUDERDALE, FL 33306



DO NOT WRITE IN THIS SPACE

3. Mailing Address 2. Principal Place of Business C/O JANICE Suite, Apt. #, etc City & State Country

FILED 03 MAY 22 AM 8:12

DO NOT WRITE IN THIS SPACE

Applied For 65-*5*73851 Not Applicable

5. Certificate of Status Desired 7. Name and Address of Current Registered Agent

\$8.75 Additional

## DO NOT WRITE IN THIS SPACE

ROWN THOMAS

4. FEI Number

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 applic January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00 Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

OFFICERS AND DIRECTORS 10. PRES, TITLE TITLE 000019747160 DAVID PARRISH NAME NAME 2951 SOUTHAVEN DRIVE 05/22/03--01096--002 \*\*150.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP ANNAPOLIS, MD 21401 SEC/TRES, TITLE TITLE JANICE P. HAGY 3010 N. E. 16 AVE, #102 NAME NAME STREET ADDRESS STREET ADDRESS OAKLAND PARK, FL 33334 CITY-ST-ZIP CITY-ST-ZIP TITLE DIR. TITLE SUSAN T. BROWN 3802 PARKMONT AVENUE NAME NAME STREET ADDRESS STREET ADDRESS DO NOT WRITE BALTIMORE, MD. 21206 CITY-ST-ZIF CITY-ST-ZIP TITLE DIR. STEVEN L. BROWN TITLE IN THIS SPACE NAME 1706 B. COPPER STREET STREET ADDRESS STREET ADDRESS TUCSON, AZ 85719 CITY-ST-ZIP CITY-ST-ZIP TITLE NANCY A. JAMROG 3127 N. TERRELL PLACE NAME NAME STREET ADDRESS STREET ADDRESS TUCSON, AZ 85719 CITY-ST-ZIP CITY-ST-ZIP TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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 on any of the corporation or the receiver or trustee empowered to execute this report attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: \_4

CITY-ST-ZIP

CR2E034B (12/02)