## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000098556 (9)

BROWN LAND GROUP, INC.

2961 CHRISTOPHER CREEK ROAD NO JACKSONVILLE FL 32217			2961 CHRISTOPHER CREEK ROAD NO Jacksonville fl 32217-2451								
							3. Date Incorporated or Qua 11/26/1996	lified	3a. Date	of Last Re	eport
2. Principal Pl	ace of Business	2a. Mailing	2a. Mailing Address				4. FEI Number			Ap	plied For
21		26					39-342253	3		<del>.,.l  </del>	Applicable
Suite, Apt	#, etc	ļ	Suite, Apt. #, etc.				5. Certificate of Status Desir	ed		\$8.75 A	
22	PERSONAL PROPERTY.	27	7 City & State			Fee Required					
City & State	)		цате				Election Campaign Finan     Trust Fund Contribution	cing		\$5.00 Added t	
<b>23</b> Zip	Country	<b>28</b>		Cor	untry	,	8. This corporation has liabi	lity for			
24	25	29		30	, y		Florida Statutes		Yes K		133.032,
24]	9. Name and Address of Curr		ent	1301	Τ.		10. Name and Address of N				
ROB	SON, MARY A				81	Name					
	DEPENDENT DRIVE STE 2600			82 Street Addr			ddress (P.O. Box Number is Not Ad	centar	nie)		
	(SONVILLE FL 32202				0.	Olicot Ac	Julipas (1.10. Box Humber to Hot File	copiai	3107		
5, 15,					83						
					84	City			···· I	<b>85</b> Zip (	Code
					ļ	′			FL		
office or re	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	ite of Florida, Such.	change was	authorize	ad ba	z the corpo	orporation submits this statement for tration's board of directors. I hereby	or the p ( accel	ourpose of ci pt the appoir	nanging it ntment as	s registered registered
SIGNATURE	Stignature, hyped or priction name of registered of	agent and title Lapolicable	. (NO	TE Registere	ed Ape	en algnature re	quired when reinstating)		DATE	····· ··· ···	
12.		ND DIRECTORS		13.		· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO	OFFI	CERS AND D	IRECTOR	S IN 12
117; <b>E</b>	D		DELETE	1.1 T	ITLE					Change	Addition
NAME	BROWN, DONALD			1.2 N	IAME	1					
STREET ADDRESS	2961 CHRISTOPHER CREEK	ROAD NO		1.3 S	TREET	ADDRESS					
CITY - ST - ZIP	JACKSONVILLE FL 32217			1.4 0	HY-S	ST-21P					
TIT_E	D		DELETE	2.1 7	TTLE				L	Change	Addition
NAME	Brown, Edmund C			2.2 ft	AME						
STREET ADDRESS	2961 CHRISTOPHER CREEK	ROAD NO		2.3 \$	TREE	T ADDRESS					
CITY - \$1 - ZIP	JACKSONVILLE FL 32217					ST - ZIP				1.0.	T 1 4 1 1 1 2
TITLE			☐ DELETE	3.1 T	TITLE				L.	_l Change	■ Addition
NAME				3.2 N	MAME						
STREET ADDRESS				3.3 9	STAEE	ADDRESS					
C-TY-ST-7IP			1 55,575			ST-ZIP				Charas	Addition
TiTLE		1	☐ DELETE		UILLE				L.	Change	CT VOUROU
NAME					NAME	i i					
STREET ADDRESS						T ADDRESS					
CITY - ST - ZIP			DELETE		-	ST-ZIP				Change	Addition
TITLE			☐ DELETE	5.1 3						T cuande	C_J Addition
NAME					NAME						
STREET ADORESS						T ADDRESS					
CITY-ST-ZIF			DELETE			ST-ZIP			<u> </u>	Change	Addition
TILE			ב) טבנצונ	1	TITLE				li-		LI NOSITOR
NAM!					NAME	i i					
STREET ADDRESS						T ADDRESS					
CITY ST-ZIP	by could, that the information	diad with this files	door not alla			ST-ZIP	ated in Section 119.07(3)(i), Florida	Statut	es I further o	ertify that	the
informatio	on indicated on this annual terroit of	or supplemental and or the receiver or t	nual report is trustee empo	true and wered to	acc	urate and I	that my signature shall have the sal sport as required by Chapter 607, F	ne leg Iorida	ai effect as i	i made un I that my i	der oatn; mai name

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

E. BIOWN

Daytime Phone # 0000110

**FILED** 

Apr 07 1997 8:00am

Secretary of State