## 2002 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# P97000060732

Entity Name: BROWN & STANFORD COMPANY, INC.

FILED May 15, 2002 8:00 AM Secretary of State

Current P	rincipal Place of	Business:	New Principal Place	New Principal Place of Business:	
	IMERALL RD IVILLE, FL 32216	US			
Current N	lailing Address:		New Mailing Address	::	
	IMERALL RD IVILLE, FL 32216	US			
FEI Number	: 59-3457084 F	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of Curr	ent Registered Agent:	Name and Address o	f New Registered Agent:	
STANFORD, JOHN C J VP 5666 SUMMERALL RD JACKSONVILLE, FL 32216 US			5666 SUMMÉRALL RE	STANFORD, JOHN C J P 5666 SUMMERALL RD JACKSONVILLE, FL 32216 US	
	e named entity subr e of Florida.	mits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JOHN C. STANFORD, JR., PRESIDENT			JT	05/15/2002	
	Electronic S	Signature of Registered Ag	ent	Date	
•	-	isfy its Intangible Tax filing reast Fund Contribution ( ).	quirement and elects to do so (X).		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () Dele STANFORD, JOHN 5666 SUMMERALL JACKSONVILLE, FL	C JR. RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	ST () Dele STANFORD, VICTO 5666 SUMMERALL JACKSONVILLE, FL	RIA B RD	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V () Del WILLIAMS, JAMES 215 N CELERY AVE JACKSONVILLE, FL	F JR E	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	V () Dele WILLIAMS, PAUL R 5666 SUMMERALL		Title: Name: Address:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: VICTORIA B. STANFORD ST 05/15/2002

JACKSONVILLE, FL 32216

City-St-Zip: