

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000025842

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** BROWN'S CONSULTING SERVICE, P.A.

**Current Principal Place of Business:**

2017 SUMMIT BLVD.  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

2017 SUMMIT BLVD.  
PENSACOLA, FL 32503

**New Mailing Address:**

**FEI Number:** 59-3568544

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BROWN, WILLIAM H  
2017 SUMMIT BLVD.  
PENSACOLA, FL 32503 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: VP  
Name: BRANO, BENNY J  
Address: 13806 BROOKLETVIEW COURT  
City-St-Zip: HOUSTON, TX 77059

Title: P  
Name: BROWN, WILLIAM H BROWN  
Address: 2017 SUMMIT BLVD  
City-St-Zip: PENSACOLA, FL 32503

Title: S  
Name: BROWN HUBER, LYNN  
Address: 2485 CARTER ROAD  
City-St-Zip: BILOXI, MS 39531

Title: T  
Name: BROWN, LYLE W  
Address: 2017 SUMMIT BOULEVARD  
City-St-Zip: PENSACOLA, FL 32503

Title: R  
Name: BROWN, LINDA  
Address: 2017 SUMMIT BLVD  
City-St-Zip: PENSACOLA, FL 32503

I hereby 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 all other like empowered.

SIGNATURE: WILLIAM H. BROWN

P

03/12/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date