

# 2011 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P99000060874

FILED  
Nov 06, 2011  
Secretary of State

**Entity Name:** BROWNLEE AND ASSOCIATES, INC.

**Current Principal Place of Business:**

414 N ALEXANDER ST  
PLANT CITY, FL 33563 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 4894  
PLANT CITY, FL 335644894 US

**New Mailing Address:**

414 N ALEXANDER ST  
PLANT CITY, FL 33563 US

**FEI Number:** 59-3591455

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

RICHTER, REBECCA L  
3505 JAP TUCKER RD  
PLANT CITY, FL 33566 US

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

BROWNLEE, BRUCE C  
808 S BOULEVARD  
TAMPA, FL 33606 US

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:** BRUCE BROWNLEE

11/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BROWNLEE, CARL  
**Address:** 2110 N GOLFVIEW DRIVE  
**City-St-Zip:** PLANT CITY, FL 33566

**Title:** VTD  
**Name:** BROWNLEE, BRUCE  
**Address:** 808 S BOULEVARD  
**City-St-Zip:** TAMPA, FL 33606

**Title:** D  
**Name:** BROWNLEE, GERALDINE  
**Address:** 2110 N GOLFVIEW DRIVE  
**City-St-Zip:** PLANT CITY, FL 33566

**Title:** SDV  
**Name:** BROWNLEE, DENNIS M  
**Address:** 13832 HWY 92 E  
**City-St-Zip:** DOVER, FL 33527 US

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:** BRUCE BROWNLEE

VTD

11/06/2011

Electronic Signature of Signing Officer or Director

Date