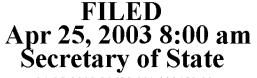
2003 FOR PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR) S88263 **DOCUMENT#** 1. Entity Name RICHARD BROWN LOGGING, INC.



04-25-2003 90689 001 ***450.00



| 10. OFFICERS AND DIRECTORS | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 | |
|--|---|---|-----------------------|
| NAME STREET ADDRESS CITY-ST-ZIP | PTV Delete BROWN, RICHARD RT 1 BOX 56 HOSFORD FL | TITLE NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| STREET ADDRESS | D Delete BROWN, RICHARD RT 1 BOX 56 HOSFORD FL | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| STREET ADDRESS | SDelete BROWN, RICHARD G RT. 1 BOX 56 HOSFORD FL | NAME STREET ADDRESS CITY-ST-ZIP | Change Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition |
| TITLE NAME STREET AODRESS CHY-ST-ZIP | ☐ Delete | TITLE NAME STREET ADDRESS CITY-ST-ZIP | ☐ Change ☐ Addition . |
| TITLE NAME STREET ADDRESS CITY ST. 7/D | ☐ Delete | TITLE NAME STREET ADDRESS | ☐ Change ☐ Addition |

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 Block 11 if

SIGNATURE:

HWY 65 SOUTH

US

HOSFORD FL 32334

Suite, Apt. #, etc.

City & State

RT. 1 BOX 56

SIGNATURE

Zip