

**FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00**

**CORPORATION  
ANNUAL REPORT  
1995**



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northing  
Secretary of State  
DIVISION OF CORPORATIONS

**APPROVED  
AND  
FILED**

95447-1 PM11:42

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DOCUMENT # S89307 (0)**

1. Corporation Name:

**J.R. BROWN INVESTMENTS PROPERTIES, INC.**

Principal Place of Business:

**830 9TH STREET SOUTH  
JACKSONVILLE BEACH FL 32240  
US**

Mailing Address:

**P. O. BOX 50700  
JACKSONVILLE BEACH FL 32240  
US**

(Do not write in this space)

3. Date of Incorporation: **10/21/1991** 3a. Date of Last Report: **06/21/1994**

4. FEI Number: **59-3092295** Applied For: ☐ Not Applicable: ☐

5. Certificate of Status Desired: ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: ☐ **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under Chapter 218, Florida Statutes: ☒ Yes ☐ No

2. Principal Place of Business:

21. State: **FL**

2a. Mailing Address:

26. State: **FL**

22. City & State:

27. City & State:

23. City:

28. City:

24. City:

29. City:

30. City:

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PATTERSON, LAWRENCE R.  
3010 SOUTH 3RD STREET  
SUITE A  
JACKSONVILLE BEACH FL 32250**

81. Name:

82. Street Address: (P.O. Box Number is Not Acceptable)

83. City:

84. State:

**FL**

85. Zip Code:

11. By filing this report, the corporation certifies that it is in compliance with the provisions of Chapter 218, Florida Statutes, and that the information furnished is true and correct. The corporation also certifies that it has paid the required fee for this report. If the corporation is not in compliance with the provisions of Chapter 218, Florida Statutes, it shall file a statement of non-compliance with the Department of State.

SIGNATURE:

12. Officer Name and Title:

**PST  
BROWN, J. R., JR.  
830 9TH STREET SOUTH  
JACKSONVILLE BCH. FL**

13. Address of Corporate Headquarters:

**ZIP 32250**

14. Officer Name and Title:

**D  
BROWN, J. R., JR.  
830 9TH STREET SOUTH  
JACKSONVILLE BCH. FL**

**ZIP 32250**

15. Officer Name and Title:

16. Officer Name and Title:

17. Officer Name and Title:

18. Officer Name and Title:

19. Officer Name and Title:

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25. Officer Name and Title:

26. Officer Name and Title:

27. Officer Name and Title:

28. Officer Name and Title:

29. Officer Name and Title:

30. Officer Name and Title:

SIGNATURE:

**J.R. Brown Jr**  
**J.R. BROWN, JR**

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/29/95 (904) 241-7256**