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CORPORATION ANNUAL REPORT
1995

APPROVED AND FILED

95 MAY -1 PM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **VO4945** **(4)**

1. Corporation Name
J. R. BROWN DEVELOPMENT CORP.

Principal Place of Business	Mailing Address
893 - 9TH ST., S. JACKSONVILLE BEACH FL 32250 US	P.O. BOX 50700 JACKSONVILLE BCH. FL 32240 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/08/1992**
3a. Date of Last Report: **06/22/1994**
4. FEI Number: **59-3100044** ☐ 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 S. 199.032, Florida Statutes. ☒ Yes ☐ No

2. Principal Place of Business — 21 / Suite, Apt. # etc. 22 / City & State 23 / Zip 24 / Country 25
2a. Mailing Address — 26 / Suite, Apt. # etc. 27 / City & State 28 / Zip 29 / Country 30

9. Name and Address of Current Registered Agent

PATTERSON, LAWRENCE R.
3010 SO. THIRD STREET
SUITE A
JACKSONVILLE BEACH FL 32250

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City — **FL** — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
TITLE	D	TITLE	P/S/T ☐ Change ☒ Addition
NAME	BROWN, J.R., JR.	NAME	
STREET ADDRESS	830 9TH ST. SO.	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE BCH FL	CITY-ST-ZIP	ZIP 32250
TITLE	V	TITLE	☐ Change ☒ Addition
NAME	BROWN, JANE C.	NAME	
STREET ADDRESS	830 - 9TH ST., S.	STREET ADDRESS	
CITY-ST-ZIP	JACKSONVILLE BCH. FL	CITY-ST-ZIP	ZIP 32250
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE		TITLE	☐ Change ☐ Addition
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

14. I the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J.R. Brown, Jr — 4/29/95 — (904)241-7256
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
J.R. BROWN, JR

0024083 CP