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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED
Mar 04 1997 8:00am
Secretary of State

DOCUMENT # V12536

(1)

1. Corporation Name

BROWN & COMPANY, INC.



Principal Place of Business

Mailing Address

10102 AILERON AVENUE
PENSACOLA FL 32506

10102 AILERON AVENUE
PENSACOLA FL 32506-8223

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BROWN, PATRICK F
400 WINTON AVE.
PENSACOLA FL 32507

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 principal place of business 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 authorized to accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Patrick F. Brown

(NOTE: Registered Agent signature required when reinstating)

DATE

2-27-97

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

TITLE

NAME

STREET ADDRESS

CITY, ST, ZIP

PD
BROWN, JAMES D
13413 GONGORA DR.
PENSACOLA FL 32507

D
BROWN, PATRICK F
400 WINTON AVE.
PENSACOLA FL 32507
ST
MAJEWSKI, STANLEY A III
300 COLBERT AVE.
PENSACOLA FL 32507

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

☐ DELETE

13

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 LE

1.2 ME

1.3 STREET ADDRESS

1.4 Y- ST- ZIP

2.1 LE

2.2 ME

2.3 STREET ADDRESS

2.4 Y- ST- ZIP

3.1 LE

3.2 ME

3.3 STREET ADDRESS

3.4 Y- ST- ZIP

4.1 LE

4.2 ME

4.3 STREET ADDRESS

4.4 Y- ST- ZIP

5.1 LE

5.2 ME

5.3 STREET ADDRESS

5.4 Y- ST- ZIP

6.1 LE

6.2 ME

6.3 STREET ADDRESS

6.4 Y- ST- ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this report does not qualify for exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplement to this 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, director, or shareholder of the corporation or the person or persons 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 corrected with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DATE

2-28-97

0488115

CR2E034 (9/96)