5-14-98 B 7299 C FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



I LORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # M4

Block 12 or Block 13 if changed, or

M48369

(6)

R.A. BROWN & SON., ELECTRIC CO., INC.

Principal Place of Business

Mailing Address

FILED May 14 1998 8:00am Secretary of State



C/O RICHARD A. BROWN C/O RICHARD A. BROWN 1407 SW BILTMORE ST 1407 SW BILTMORE ST PORT ST LUCIE FL 34963 PORT ST LUCIE FL 34983 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 03/16/1987 FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 59-2785148 265 EW BATSTLUE Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intergible Personal Property Tax due June 30. Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BROWN, RICHARD A 1407 SW BILTMORE ST 82 Street Address (P.O. Box Number is Not Acceptable) PORT ST LUCIE FL 34983 83 84 City 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. Large for large with, and ascept the obligations of Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. DELETE Change Addition TITLE 1 1 TITLE BROWN, RICHARD A. NAME 1.2 NAME SW Port ST WEED Blud 1407 SW BILTMORE ST STREET ADDRESS 1.3 STREET ADDRESS Port ST LUCIC Flx. 34984

Swite 202 | Change | Addition **PT** ST LUCIE FL CITY-ST-ZIP 1.4 CITY - ST- 7IP DELETE TITLE 2.1 TITLE BROWN, RICHARD A. 2.2 NAME 1407 SW BILTMORE ST STREET ADDRESS 2.3 STREET ADDRESS PT ST LUCIE FL 2.4 CITY-ST-7IP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADORESS CITY-ST-ZIP 3.4. CITY - ST-ZIP DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 52 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change ___ Addition TITLE 61 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. I hereby certify that the information supplied with this fiting does not qualify for the exemption stated in Section 119.07(3)(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 secure or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in