

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 07, 2006 8:00 am
Secretary of State

07-07-2006 90002 009 ****61.25

DOCUMENT # N03000008786
 1. Entity Name
GOD'S BROTHERLY LOVE OUTREACH MINISTRIES, INC.



Principal Place of Business Mailing Address
5023 21ST WAY EAST BRADENTON FL 34203 **5023 21ST WAY EAST BRADENTON FL 34203**



2. Principal Place of Business 3. Mailing Address
(Church) God's Brotherly Love Outreach Min.
61045 610 45th STE. **61045th STE EAST**
 Suite, Apt. #, etc. Suite, Apt. #, etc.

City & State **Brad. FL** City & State **Bradenton FL**
 Zip **34208** Country Country

1st MOORE CR2E037 (10/05)
 4. FEI Number **54-2129737** Applied For Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
SUTTON, CHRISTINA
1311 17TH STREET CT EAST
BRADENTON FL 34208

7. Name and Address of New Registered Agent
 Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.
 SIGNATURE: *Pastor James Sutton Pastor Christina Sutton*
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> Delete
NAME	SUTTON, JAMES	
STREET ADDRESS	1311 17TH STREET CT EAST	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	VP	<input type="checkbox"/> Delete
NAME	SUTTON, CHRISTINA	
STREET ADDRESS	1311 17TH STREET CT EAST	
CITY-ST-ZIP	BRADENTON FL 34208	
TITLE	C	<input type="checkbox"/> Delete
NAME	SMITH, HENRY	
STREET ADDRESS	1507 1ST AVE EAST	
CITY-ST-ZIP	PALMETTO FL 34221	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *James Sutton* **7-1-06 447-0155**
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #