#### 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

#### DOCUMENT# N03779

Entity Name: MARIE BROWN MINISTRIES, INC.

## **Current Principal Place of Business:**

% DANIEL C. FREEMAN, JR. 128 OXFORD RD FERN PARK, FL 32730

## **Current Mailing Address:**

P.O. BOX 6766 COLUMBIA, SC 29260

# FEI Number: 59-2423649

#### Name and Address of Current Registered Agent:

FREEMAN, DANIEL C., JR. 128 OXFORD RD FERN PARK, FL 32730 US FILED Jan 29, 2019 Secretary of State 3745243042CC

Certificate of Status Desired: No

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.

#### SIGNATURE:

Electronic Signature of Registered Agent

## Officer/Director Detail :

Officer/Director Detail :						
Title	Р	Title	D			
Name	BROWN, HELEN M	Name	SHAMLIN, MICHELE L			
Address		Address	3230 HOFFMEYER RD APT.5-104			
City-Sta	e-Zip: COLUMBIA SC 29206	City-State-Zip:	FLORENCE SC 29501			
Title	DST	Title	D, V			
Name Address	BROWN, ELAINE M	Name	MCALLISTER, CAROLINE A			
	6415 GILLCREEK ROAD	Address	1089 ROCKY SPRINGS ROAD			
City-Sta	e-Zip: COLUMBIA SC 29206	City-State-Zip:	FREDERICK MD 21702			
Title Name Address City-Sta	e-Zip: TULSA OK 74112	Title Name Address City-State-Zip:	D SANDERS, ERNESTINE M 188-34 ILLION AVENUE ST. ALBANS NY 11412			
Title Name Address City-Sta		Title Name Address City-State-Zip:	DIRECTOR MCALLISTER, DANIEL P. 1089 ROCKY SPRINGS ROAD FREDERICK MD 21702			

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I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

# SIGNATURE: HELEN MARIE BROWN

PRESIDENT

01/29/2019

Date

Electronic Signature of Signing Officer/Director Detail

Date

#### **Officer/Director Detail Continued :**

Title	DIRECTOR	Title	D
Name	BROWN, HUBERT III	Name	TREGONING, SUSAN
Address	601 E H STREET	Address	22 MOONSHINE DRIVE
City-State-Zip:	BRUNSWICK MD 21716	City-State-Zip:	EVANSVILLE WI 53536