

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 07, 2006 08:00 AM
Secretary of State

DOCUMENT # 703848

Entity Name
THE ROSA L. BROWN FOUNDATION, INC.



Principal Place of Business
**1024 N.W. 6TH ST.
FORT LAUDERDALE, FL 33311**

Mailing Address
**RALEIGH R RAWLS
1024 N.W. 6TH ST.
FORT LAUDERDALE, FL 33311**

DO NOT WRITE IN THIS SPACE



04032006 No Chg-NP CR2E037 (11/05)

4. FEI Number
59-2352403

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RAWLS, RALEIGH R. ESQ
1024 N.W. 6TH ST.
FT. LAUDERDALE, FL 33311**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	WILLIAMS, NORBERT C
STREET ADDRESS	5400 NW 64TH TERR
CITY-ST-ZIP	LAUDERHILL, FL 33319
TITLE	VD
NAME	RAWLS, RALEIGH R. ESQ
STREET ADDRESS	1024 NW 6TH ST.
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	TD
NAME	RAWLS, RODNEY P
STREET ADDRESS	8325 FAIRWAY RD.
CITY-ST-ZIP	SUNRISE, FL 33351
TITLE	S
NAME	WILLIAMS, ANNIE W
STREET ADDRESS	421 NW 18TH AVE
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/22/06-80050-003 61.25

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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:

Raleigh R. Rawls
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Raleigh R. Rawls, VD 04/05/06 954. 467-7908

Date

Daytime Phone #