FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPÓRATIONS

DOCUMENT #

(4)

THE BROWNSVILLE CHURH OF CHRIST, INC.

Principal Place of Business Mailing Address 4561 N.W. 33RD COURT 4561 N.W. 33RD COURT

FILED May 20 1997 8:00am Secretary of State



MIAMI FL 33142-4320		MIAMI FL 33142-4320										
			į			3. Date Incorporated or Qualified 01/07/1975	3a. Da	ite of L 04/26				
<u> </u>	Place of Business	2a. Mailing Address				4. FEI Number			Ap	plied For		
21		26				59-6523676			No	Applicable		
Sulte, Apt.		Suite, Apt. #, etc.				5. Certificate of Status Desired		• -		dditional quired		
City & State	θ	City & State				Election Campaign Financing Trust Fund Contribution				May Be o Fees		
Zip	Country	Zip	Oot	intry	,	8. This corporation has liability for						
24	25	29	30] No		100.002,		
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New R	gistered /	Agent				
			:	81	Name							
BRYANT	, Perry					82 Street Address (P.O. Box Number is Not Acceptable)						
	W. 5TH AVENUE					Superindules (1.6. box rightbor is not Acceptable)						
MIAMI FI	L 33150			83								
				84	City			last				
					ĺ		FL	85	Zip (
	to the provisions of Sections 617.050 registered agent, or both, in the State m familiar with, and accept the oblig.	2 and 617.1508, Florida State of Florida. Such change was ations of, Section 617.0503, F	utes, the a sauthorize florida Stal	bove d by lutes	e-named cor y the corpora s.	poration submits this statement for the ation's board of directors. I hereby acce						
SIGNATURE	Signature, typed or printed name of register diago	on and title if applicable (NC	OTE: Registere	d Age	ent signature requ	ired when reinstating)	DATE	+ - 4		-97		
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIREC	CTOR	S IN 12		
TITLE	VD	☐ DELETE	1.1 TI	TLE				☐ Ch	ange	Addition		
NAME	MCCLENDON, EUGENE		1.2 N	1.2 NAME								
STREET ADORESS	2174 NW 99 STREET		1.3 5	1.3 STREET ADDRESS								
CITY-ST-ZIP	MIAMI FL	1.41		ITY-S	IT-ZIP							
TITLE	STD DELETE		2 1 TI	2 1 TITLE				Ch	ange	Addition		
NAME	BRYANT, PERRY		22 N	AME								
STREET ADORESS	6930 NW 5TH AVE		2.35		ADDRESS							
CITY-ST-ZIP	MIAMI FL 33150		2 H D	ITY-S	ST-ZIP					,		
TITLE	PD	☐ DELETE	3.1 TI	TLE				Ch	ange	Addition		
NAME	HOLT, ROBERT L		3.2 N	AME								
STREET ADDRESS	3071 N W 69 TERR		3.3 S1	IREET	ADDRESS							
CITY-ST-ZIP	MIAMI FL		3.4. C	ITY-S	S1-ZIP							
TITLE	D	DELETE	4.1 10	ΊL€				Ch	ange	Addition		
NAME	MCSWAIN, CHARLIE		4. 2 N	AME								
STREET ADDRESS	1460 NW 174TH STREET		4.3 ST	ree1	ADDRESS							
CITY-ST-ZIP	MIAMI FL				1-ZIP							
TITLE	D	☐ DELETE	5.1 11	TLE				. Ch	ange	Addition		
NAME	HUTTON, GILES		5.2 N/	AME								
STREET ADDRESS	3150 N.W. 97TH ST.		5.3 ST	REET	ADDRESS							
CITY-ST-ZIP	MIAMI FL		5.4 Ct		T-ZIP					Press		
TITLE		☐ DELETE	6.1 T)					☐ Cha	ange	Addition		
NAME			6.2 N/									
STREET ADDRESS					ADDRESS							
CITY-ST-ZIP	over any life that the Information aunalian	1	6.4 CI	TY-S	T-21P	11. 0 440 07/0/0 5						

I do nereby certify that the Information supplied with this filing 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.