

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

FILED
Apr 17, 2006 08:00 AM
Secretary of State

DOCUMENT # 731708

1. Entity Name
THE BROWNSVILLE CHURH OF CHRIST, INC.



Principal Place of Business
**4561 N.W. 33RD COURT
MIAMI, FL 33142-4320**

Mailing Address
**4561 N.W. 33RD COURT
MIAMI, FL 33142-4320**



04142006 No Chg-NP CRZE037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-6523676

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**BROWNSVILLE CHURCH OF CHRIST
4561 NW 33 COURT
MIAMI, FL 33142**

**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 resigning)

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
NAME
STREET ADDRESS
CITY-ST-ZIP
**VD
MCCLENDON, EUGENE
2174 NW 99 STREET
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TSVP
MCCLENDOR, EUGENE
2174 NW 99TH ST.
MIAMI, FL 33147**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**PD
HOLT, ROBERT L
3071 N W 69 TERR
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
MCSWAIN, CHARLIE
1460 NW 174TH STREET
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HUTTON, GILES
3150 N.W. 67TH ST.
MIAMI, FL**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

U00000516108
04/29/06-80234-025 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:

Eugene McClendon
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-14-06 305/6968069

Date

Daytime Phone #