

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 739533

FILED
May 01, 2006
Secretary of State

Entity Name: ABE BROWN MINISTRIES, INC.

Current Principal Place of Business:

2921 N. 29TH STREET
TAMPA, FL 33605

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 11453
TAMPA, FL 33680 US

New Mailing Address:

FEI Number: 59-2410601 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BLOUNT, ROBERT P III
2921 N. 29TH STREET
TAMPA, FL 33605 US

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

Date

OFFICERS AND DIRECTORS:

Title: CEO () Delete
Name: BROWN, ABRAHAM R.
Address: 3602 RIVER GROVE DRIVE
City-St-Zip: TAMPA FL,

Title: C () Delete
Name: BATEMAN, RICK
Address: 2410 SUNSET DRIVE
City-St-Zip: TAMPA, FL 33629

Title: D () Delete
Name: BLOUNT, ROBERT P
Address: 5002 N 39TH STREET
City-St-Zip: TAMPA, FL 33610

Title: D () Delete
Name: MERCHANT, JOSEPH M.
Address: 15429 BRUSHWOOD DR
City-St-Zip: TAMPA FL,

Title: S () Delete
Name: PERRIN, BUDDY
Address: 202 S. 22ND STREET, SUITE 204
City-St-Zip: TAMPA, FL 33605

Title: T () Delete
Name: BAKER, JEANETTE
Address: 12542 ST. CHARLOTTE DRIVE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT P. BLOUNT, III

PRES

05/01/2006

Electronic Signature of Signing Officer or Director

Date