# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 09, 2004**
**Secretary of State**

DOCUMENT# N01000007865

**Entity Name:** BRENTWOOD RESTORATION OUTREACH MINISTRIES, INC.

**Current Principal Place of Business:**

4901 NORTH PALAFOX STREET
PENSACOLA, FL 32505

**New Principal Place of Business:**

**Current Mailing Address:**

4901 NORTH PALAFOX STREET
PENSACOLA, FL 32505

**New Mailing Address:**

**FEI Number: 59-3759916** **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

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

VAUGHAN, RANDALL
4901 NORTH PALAFOX STREET
PENSACOLA, FL 32505

**Name and Address of New Registered Agent:**

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: D ( ) Delete
Name: BROWN, DAVID
Address: 1601 CONDOR DRIVE
City-St-Zip: CANTONMENT, FL 32533

Title: D ( ) Delete
Name: COX, ROBERT W
Address: 5306 BRISTOL AVENUE
City-St-Zip: PENSACOLA, FL 32505

Title: D ( ) Delete
Name: FISHER, WALTER D
Address: 2299 B-2 SENIC HWY
City-St-Zip: PENSACOLA, FL 32503

Title: D ( ) Delete
Name: BOX, RAY
Address: 1604 AMERICUS AVENUE
City-St-Zip: PENSACOLA, FL 32507

Title: D ( ) Delete
Name: WELCH, CLAUDE T
Address: 5750 FRANK REEDER RD
City-St-Zip: PENSACOLA, FL 32526

Title: D ( ) Delete
Name: WILLIAMSON, CHARLES
Address: 7833 PETERSON POINT RD
City-St-Zip: MILTON, FL 32583

**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 Section 119.07(3)(i), 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: DAVID BROWN D 07/09/2004

Electronic Signature of Signing Officer or Director — Date