

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 30, 2004 8:00 am**  
**Secretary of State**

04-30-2004 90248 009 \*\*\*\*61.25

**DOCUMENT # N01000008191**

1. Entity Name  
**MY BROTHER'S KEEPER OUTREACH MINISTRY, INC.**



Principal Place of Business  
**3071 N.W. 19TH ST  
FORT LAUDERDALE, FL 33311**

Mailing Address  
**2061 N.W. 43RD TERR  
SUITE 202  
LAUDERHILL, FL 33313**



2. Principal Place of Business  
**2061 N.W. 43rd Terr**

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04272004

Chg-NP

CR2E037 (10/03)

City & State

City & State

4. FEI Number  
**65-1155589**

Applied For

Not Applicable

Zip  
**33313**

Country

**Broward**

Zip

Country

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**N**  
**NESBITT, JUDY**  
**2061 NW 43RD TERRACE**  
**#202**  
**LAUDERHILL, FL 33313**

Name

**Nesbitt Judy**

Street Address (P.O. Box Number is Not Acceptable)

**2061 N.W. 43rd Terrace**

**#202**

City

**Lauderhill**

**FL**

Zip Code

**33313**

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 **Judy Nesbitt Sec.**

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

(NOTE: Registered Agent signature required when reinstating)

**4/27/04**  
DATE

**Filing Fee is \$63.25**  
**Due by May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

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

**Make check payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**PD**  
**NESBITT, ADRIAN**  
**2061 NORTHWEST 43RD TERRACE**  
**LAUDERHILL, FL 33313** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**STD**  
**NESBITT, JUDY**  
**2061 NORTHWEST 43RD TERRACE**  
**LAUDERHILL, FL 33313** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
**D**  
**FAISON, ROOSEVELT H**  
**2061 NW 43RD TERRACE #202**  
**LAUDERHILL, FL 33313** ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

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12. I hereby 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 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:

**Judy Nesbitt**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**4/29/04**  
Date

**954-735-7628**  
Daytime Phone #