2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000104

City-St-Zip:

HOUSTON, TX 77040

FILED Feb 29, 2004 Secretary of State

Entity Nan	ne: BROTHE	RHOOD OF THE COAST, INC				
Current Principal Place of Business:			New Princ	New Principal Place of Business:		
3391 BAYC	EL L. BRITTO DU SOUND T KEY, FL 34					
Current M	ailing Addres	s:	New Maili	New Mailing Address:		
C/O SAMUEL L. BRITTON 3391 BAYOU SOUND LONGBOAT KEY, FL 34228			4529 MAR	C/O TOM COLLIER 4529 MARINERS MOORING DICKINSON, TX 77539		
FEI Number:	51-0419439	FEI Number Applied For ()	FEI Number Not App	licable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
1206 MANA	N, G. JOSEPH ATEE AVENUI ON, FL 34205					
The above in the State		submits this statement for the p	urpose of changing i	its registered	office or registered agent, or both,	
SIGNATUR	RE:					
Electronic Signature of Registered Agent			ent		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () CONARD, RICH 3643 CORTEZ BRADENTON, F	RD W	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	D () BRITTON, SAM 3391 BAYOU S LONGBOAT KE	DUND	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address: City-St-Zip:	FINE, CHARLES	AY, SUITE 1607	Title: Name: Address: City-St-Zip:	() Change ()Addition	
Title: Name: Address:	D () COLLIER, THO 13120 HEMPST		Title: Name: Address:	COLLIER, TH	X) Change()Addition OMAS :RS MOORING	

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.

City-St-Zip:

DICKINSON, TX 77539

SIGNATURE: THOMAS COLLIER 02/29/2004 D