

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000104

FILED  
Feb 23, 2010  
Secretary of State

Entity Name: BROTHERHOOD OF THE COAST, INC.

**Current Principal Place of Business:**

C/O SAMUEL L. BRITTON  
8934 WILD DUNES DRIVE  
SARASOTA, FL 34241

**New Principal Place of Business:**

**Current Mailing Address:**

C/O TOM COLLIER  
4529 MARINERS MOORING  
DICKINSON, TX 77539

**New Mailing Address:**

FEI Number: 51-0419439

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

HARRISON, G. JOSEPH  
1206 MANATEE AVENUE WEST  
BRADENTON, FL 34205 US

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

HARRISON, G. JOSEPH AGENT  
1206 MANATEE AVENUE WEST  
BRADENTON, FL 34205 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: TOM COLLIER

02/23/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: CONARD, RICHARD T DIR  
Address: 3643 CORTEZ RD W  
City-St-Zip: BRADENTON, FL 34210

Title: D  
Name: BRITTON, SAMUEL L DIR  
Address: 8934 WILD DUNES DRIVE  
City-St-Zip: SARASOTA, FL 34241

Title: D  
Name: FINE, CHARLES J DIR  
Address: 1501 BROADWAY, SUITE 1607  
City-St-Zip: NEW YORK, NY 10036

Title: D  
Name: COLLIER, THOMAS DIR  
Address: 4529 MARINERS MOORING  
City-St-Zip: DICKINSON, TX 77539

I hereby 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 all other like empowered.

SIGNATURE: TOM COLLIER

DIR.

02/23/2010

Electronic Signature of Signing Officer or Director

Date