

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90137 012 ****61.25

DOCUMENT # N02000005394

1. Entity Name

DIANNA BROWN MINISTRIES, INC.



Principal Place of Business

Mailing Address

708 BAYOU AVE.
STUART FL 34994

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STUART FL 34994

2. Principal Place of Business

3. Mailing Address

708 Bayou Ave SAME
Stuart Fl 34994
City & State

SAME
Suite, Apt. #, etc.
City & State

Zip 34994

Country Martin

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number 56-2385018

Applied For
Not Applicable

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

BROWN, DIANNA
708 BAYOU AVE.
STUART FL 34994

Name

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

City

FL

Zip Code

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

Dianna Brown

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

(NOTE: Registered Agent Signature required when re-registering)

DATE

3/13

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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 PD
NAME BROWN, DIANNA
STREET ADDRESS 708 BAYOU AVE.
CITY-ST-ZIP STUART FL 34994 ☐ Delete

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

TITLE SD
NAME HENDERSON, CAROLYN
STREET ADDRESS 708 BAYOU AVE.
CITY-ST-ZIP STUART FL 34994 ☒ Delete

TITLE SD
NAME Diane D Brown
STREET ADDRESS 708 Bayou Ave
CITY-ST-ZIP Stuart Fl 34994 ☐ Change ☒ Addition

TITLE TD
NAME COOKS, MINNIE R
STREET ADDRESS 2630 SW CACTUS CIRCLE
CITY-ST-ZIP PT. ST. LUCIE FL 34953 ☒ Delete

TITLE TD
NAME Tracy Henderson
STREET ADDRESS 708 Bayou Ave
CITY-ST-ZIP Stuart Fl 34994 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

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

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Dianna Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR