

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000002571

1. Entity Name
BELLEAIRE AND BROWN INC.



FILED
05 APR 29 AM 10:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
1016 SILVER RIDGE DR.
TALLAHASSEE, FL 32305

Mailing Address
1016 SILVER RIDGE DR.
TALLAHASSEE, FL 32305

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

04272005 Chg-NP CR2E037 (10/03)

4. FEI Number
91-2191965

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

HODGES, ERNESTINE B
1016 SILVER RIDGE DR.
TALLAHASSEE, FL 32305

Name

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

City

FL

Zip Code

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by May 1, 2005

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

TITLE PD ☐ Delete
NAME BROWN, ANDREW
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE VD -3RD ☐ Delete
NAME HODGES, GREGORY SR.
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE VD -1st ☐ Delete
NAME HODGES, ERNESTINE B
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE SD -Secretary ☐ Delete
NAME BROWN, ANNIE L
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE D 2nd VP ☐ Delete
NAME BROWN, RICHARD JR.
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

TITLE DT Trustee (Grounds Keeper) ☐ Delete
NAME BROWN, WILLIE
STREET ADDRESS 1016 SILVER RIDGE DR.
CITY-ST-ZIP TALLAHASSEE, FL 32305

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE WALTER L. BROWN-Treasurer ☐ Change ☒ Addition
NAME 1710 PERRY ST
STREET ADDRESS TALLAHASSEE FL 32305
CITY-ST-ZIP

TITLE RUBY D. BROWN-Asst. Secretary ☐ Change ☒ Addition
NAME 1710 PERRY ST
STREET ADDRESS TALLAHASSEE FL 32305
CITY-ST-ZIP

TITLE MADGELENE BROWN-WILLIAMS-Trustee ☐ Change ☒ Addition
NAME 385 Bob Miller RD
STREET ADDRESS CRAWFORDVILLE, FL 32327
CITY-ST-ZIP

TITLE CHARLES BROWN-HISTORIAN ☐ Change ☒ Addition
NAME 1016 SILVER RIDGE DR
STREET ADDRESS TALLAHASSEE FL 32305
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME 400054015064
STREET ADDRESS 05/06/05--01066--008 **\$1.25
CITY-ST-ZIP

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:

Ernestine B. Hodges
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-05 850-877-6426
Date Daytime Phone #