

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000002645

**FILED**  
**Jan 28, 2010**  
**Secretary of State**

**Entity Name:** MIKE BROWN MINISTRIES INTERNATIONAL, INC.

**Current Principal Place of Business:**

1735 S.W. 24TH AVENUE  
OKEECHOBEE, FL 34974

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 220  
OKEECHOBEE, FL 34973

**New Mailing Address:**

**FEI Number:** 32-0074510

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BROWN, AARON M  
9538 HIGHWAY 441  
BOYNTON BEACH, FL 33437 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** BROWN, MICHAEL G  
**Address:** 208 N.E. 2ND STREET  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** V/S  
**Name:** BROWN, THERESA R  
**Address:** 208 N.E. 2ND STREET  
**City-St-Zip:** OKEECHOBEE, FL 34972

**Title:** T  
**Name:** JOLICOEUR, NANCY  
**Address:** 2044 S.W. 19TH LANE  
**City-St-Zip:** OKEECHOBEE, FL 34974

**Title:** O  
**Name:** DAN, SCOTT  
**Address:** 110 PRAIRIE  
**City-St-Zip:** HORSESHOE BAY, TX 78657

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:** MICHAEL G. BROWN

P

01/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date