2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010683

FILED Apr 23, 2005 Secretary of State

Entity Name: BROWNSVILLE CHARRETTE NEIGHBORHOOD FOUNDATION, INC.

Current Principal Place of Business: New Principal Place of Business: JEFFERSON REAVES SR. PARK JEFFERSON REAVES SR. PARK 3090 NW 50TH STREET 3090 NW 50TH STREET MIAMI, FL 33142 MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** P.O. BOX 471205 P.O. BOX 471205 MIAMI, FL 33247 MIAMI, FL 33247 US FEI Number: 73-1722966 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: EVERETT, TIMOTHY 2101 NW 51ST STREET MIAMI, FL 33142 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change (X) Addition KILPATRICK, KENNETH M Name: Name: Address: Address: 1901 NW 81 STREET City-St-Zip: City-St-Zip: MIAMI, FL 33147 US Title: Title: () Change (X) Addition () Delete Name: Name: EVERETT, TIMOTHY Address: Address: 2140 NW 50 STREET City-St-Zip: City-St-Zip: MIAMI, FL 33142 US Title: () Delete Title: 2-VP () Change (X) Addition JACKSON, MACK Name: Name: Address: Address: 4490 NW 33 AVENUE City-St-Zip: City-St-Zip: MIAMI, FL 33142 US Title: () Delete Title: TR () Change (X) Addition Name: Name: STEWART, EVERETT 3246 NW 48 TERRACE Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33142 US Title: () Delete Title: 2-TR () Change (X) Addition SPENCE, SAMUEL Name: Name: 2138 NW 49 STREET Address: Address: City-St-Zip: City-St-Zip: MIAMI, FL 33142 US Title: () Delete Title: () Change (X) Addition SLATER, MARY Name: Name: Address: Address: 5611 NW 24 AVENUE MIAMI, FL 33142 US City-St-Zip: City-St-Zip:

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.

SIGNATURE: KENNETH M. KILPATRICK CH/P 04/23/2005