

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PM 12:22

DOCUMENT # N04291 (3)

1. Corporation Name

SOCIETY FOR THE IMPROVEMENT OF BROTHERHOOD INCORPORATED

Principal Place of Business

Mailing Address

% SAM AUSTIN JR.
321 WEST 33RD STREET
RIVIERA BEACH FL 33404

% SAM AUSTIN JR.
321 WEST 33RD STREET
RIVIERA BEACH FL 33404

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/07/1984

3a. Date of Last Report

04/25/1994

4. FEI Number

59-2608137

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

5. Certificate of Status Desired

☒

\$8.75 Additional Fee Required

6. Election Campaign Financing

Trust Fund Contribution

☐

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)

Tax Exempt Status

☒

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

☐ Yes

☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

AUSTIN, SAM JR.
321 WEST 33RD STREET
RIVIERA BEACH FL 33404

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1608, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	YOUNG, W. FRED
STREET ADDRESS	641 W. 9TH ST.
CITY - ST - ZIP	RIVIERA BCH. FL
TITLE	V
NAME	JOLLY, CLIFFORD
STREET ADDRESS	920 W. 6TH ST.
CITY - ST - ZIP	RIVIERA BCH FL
TITLE	D
NAME	WADE, EDWIN
STREET ADDRESS	1131 W 24TH ST
CITY - ST - ZIP	RIVIERA BCH FL
TITLE	D
NAME	WHITE, ARTHUR J.
STREET ADDRESS	1642 W 25TH CT
CITY - ST - ZIP	RIVIERA BCH FL
TITLE	D
NAME	MEEKS, WILLIE
STREET ADDRESS	371 22ND CT
CITY - ST - ZIP	RIVIERA BCH FL
TITLE	D
NAME	AUSTIN, SAM
STREET ADDRESS	321 W 33RD ST
CITY - ST - ZIP	RIVIERA BCH FL

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

W. Fred Young W. FRED YOUNG

4-1-95

407-842-2073

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number