

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000012388

FILED
Feb 14, 2006
Secretary of State

Entity Name: STEVEN L BROWN FOUNDATION, INC.

Current Principal Place of Business:

108 WINGED FOOT LANE
BOCA RATON, FL 33431 US

New Principal Place of Business:

Current Mailing Address:

108 WINGED FOOT LANE
BOCA RATON, FL 33431 US

New Mailing Address:

FEI Number: 20-3925412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOSES, JOHN A JR.
108 WINGED FOOT LANE
BOCA RATON, FL 33431 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 () Delete
Name: BROWN, FRANK
Address: 1815 S 29TH ST.
City-St-Zip: FORT PIERCE, FL 34947 US

Title: VP () Delete
Name: PEREZ, TERESA
Address: 10836 N KENDALL DR. APT V-1
City-St-Zip: MIAMI, FL 33176 US

Title: T () Delete
Name: MOSES, JOHN A JR.
Address: 108 WINGED FOOT LANE
City-St-Zip: BOCA RATON, FL 33431 US

Title: S () Delete
Name: BROWN, JENNIFER
Address: 3018 SUNRISE BLVD.
City-St-Zip: FORT PIERCE, FL 34982 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: PEREZ, TERESA
Address: 10836 N KENDALL DR. APT V-1
City-St-Zip: MIAMI, FL 33176 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: JOHN A MOSES JR

T

02/14/2006

Electronic Signature of Signing Officer or Director

Date