

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000011247

FILED
Apr 21, 2009
Secretary of State

Entity Name: BROWNSVILLE NEIGHBORHOOD WATCH INC.

Current Principal Place of Business:

3747 W GADSDEN
PENSACOLA, FL 32505

New Principal Place of Business:

2605 W GADSDEN ST.
PENSACOLA, FL 32505

Current Mailing Address:

3747 W GADSDEN
PENSACOLA, FL 32505

New Mailing Address:

2605 W GADSDEN ST.
PENSACOLA, FL 32505

FEI Number: 26-1438281

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WILLIAMS, RAYLA M
329 ROSS STREET
PENSACOLA, FL 32505 US

Name and Address of New Registered Agent:

BAUER, DELORES
3747 W. GADSDEN ST.
PENSACOLA, FL 32505 US

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: DELORES BAUER

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GRIMM, ALFRED F
Address: 3 KEYS COURT
City-St-Zip: PENSACOLA, FL 32505

Title: S () Delete
Name: BAUER, DELORES
Address: 3747 WEST GADSDEN STREET
City-St-Zip: PENSACOLA, FL 32505

Title: T () Delete
Name: BERGMAN, JROANNE
Address: 6 KEYS COURT
City-St-Zip: PENSACOLA, FL 325057326

Title: VP () Delete
Name: BERGMAN, OSCAR C
Address: 6 KEYS COURT
City-St-Zip: PENSACOLA, FL 325057326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: KEHOE, JAMES F PRES
Address: 2605 W. GADSDEN ST.
City-St-Zip: PENSACOLA, FL 32505

Title: SEC (X) Change () Addition
Name: BAUER, DELORES
Address: 3747 WEST GADSDEN STREET
City-St-Zip: PENSACOLA, FL 32505

Title: TREA (X) Change () Addition
Name: BAUER, DELORES
Address: 3747 WEST GADSDEN ST.
City-St-Zip: PENSACOLA, FL 32505

Title: VP (X) Change () Addition
Name: PERGE, ZSOLT N
Address: 742 CITRUS ST.
City-St-Zip: PENSACOLA, FL 32505

I hereby certify that the information supplied with this filing does not qualify 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: JAMES F. KEHOE

PRES

04/21/2009

Electronic Signature of Signing Officer or Director

Date