

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19874

FILED
Apr 29, 2004
Secretary of State

Entity Name: BROWNSVILLE NEIGHBORHOOD CIVIC ASSOCIATION, INC.

Current Principal Place of Business:

3246 NW 48TH TERRACE
MIAMI, FL 33142

New Principal Place of Business:

Current Mailing Address:

3246 NW 48TH TERRACE
MIAMI, FL 33142

New Mailing Address:

FEI Number: 65-0273534

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEWART, EVERETT SR
3246 NW 48TH TERRACE
MIAMI, FL 33142 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: PD () Delete
Name: STEWART, EVERETT SR.
Address: 3246 N.W. 48TH TERRACE
City-St-Zip: MIAMI, FL

Title: VD () Delete
Name: ANDERSON, MARTHA P
Address: 3249 N.W. 51 ST.
City-St-Zip: MIAMI, FL

Title: RS () Delete
Name: JOHNSON, GWENDOLYN
Address: 3010 N 51 ST TERRACE
City-St-Zip: MIAMI, FL 33142

Title: TD () Delete
Name: REAVES, JENNIE
Address: 3315 N.W. 49TH ST.
City-St-Zip: MIAMI, FL

Title: S () Delete
Name: WILLIAMS, ERNESTINE
Address: 4875 NW 31ST AVENUE
City-St-Zip: MIAMI, FL 33142

Title: S () Delete
Name: STEWART, GLINNER H
Address: 3246 N W 48TH TERRACE
City-St-Zip: MIAMI, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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 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: EVERETT STEWART

MR

04/29/2004

Electronic Signature of Signing Officer or Director

Date