

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT # N19874**  
 1. Entity Name  
**BROWNSVILLE NEIGHBORHOOD CIVIC ASSOCIATION, INC.**



**FILED**

**07 SEP 19 AM 7:38**

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

Principal Place of Business  
**3246 NW 48TH TERRACE  
 MIAMI, FL 33142**

Mailing Address  
**3246 NW 48TH TERRACE  
 MIAMI, FL 33142**



2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

09132007 Chg-NP CR2E037 (12/06)

City & State  
 Zip Country

4. FEI Number  
**65-0273534**

Applied For  
 Not Applicable

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**STEWART, EVERETT SR  
 3246 NW 48TH TERRACE  
 MIAMI, FL 33142**

Name  
 Street Address (P.O. Box Number is Not Acceptable)  
 City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25  
 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**Make check payable to Florida Department of State**

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE PD  
 NAME STEWART, EVERETT SR.  
 STREET ADDRESS 3246 N.W. 48TH TERRACE  
 CITY-ST-ZIP MIAMI, FL  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  Change  Addition

**300110232588  
 10/03/07--01032--008 \*\*70.00**

TITLE VD  
 NAME ANDERSON, MARTHA P  
 STREET ADDRESS 3249 N.W. 51 ST.  
 CITY-ST-ZIP MIAMI, FL  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  Change  Addition

TITLE RS  
 NAME JOHNSON, GWENDOLYN  
 STREET ADDRESS 3010 N 51 ST TERRACE  
 CITY-ST-ZIP MIAMI, FL 33142  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  Change  Addition

TITLE TD  
 NAME REAVES, JENNIE  
 STREET ADDRESS 3315 N.W. 49TH ST.  
 CITY-ST-ZIP MIAMI, FL  Delete

TITLE TD  
 NAME MILDRED C. MARKS  
 STREET ADDRESS 3140N-W149TH STREET  
 CITY-ST-ZIP MIAMI, FL 33142  Change  Addition

TITLE S  
 NAME WILLIAMS, ERNESTINE  
 STREET ADDRESS 4875 NW 31ST AVENUE  
 CITY-ST-ZIP MIAMI, FL 33142  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  Change  Addition

TITLE S  
 NAME STEWART, GLINNER H  
 STREET ADDRESS 3246 N W 48TH TERRACE  
 CITY-ST-ZIP MIAMI, FL  Delete

TITLE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP  Change  Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Everett Stewart Sr. **9/14/07** **305-633-4134**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #