2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44943

FILED Apr 13, 2005 Secretary of State

Entity Name: THE CHURCH OF BROTHERLY LOVE INC.

	Principal Place of	f Business:		New Principal Place	ce of Business:	
81 N. DEE	DNY L. DAVIS ERFIELD AVE. ST LD BEACH, FL 3					
Current Mailing Address:				New Mailing Addr	New Mailing Address:	
81 N. DEE	DNY L. DAVIS ERFIELD AVE STI LD BEACH, FL 3					
			pplied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of Cui	rrent Regist	ered Agent:	Name and Address	s of New Registered Agent:	
	NTHONY L.					
336 N.W. DEERFIE	THICT. LD BEACH, FL 3	3441 US				
	e of Florida.	omits this st	atement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
	Electronic	Signature o	Registered Age	ent	Date	
OFFICERS AND DIRECTORS:						
OFFICER	S AND DIRECTO	PRS:		ADDITIONS/CHAN	GES TO OFFICERS AND DIRECTORS	
OFFICER Title: Name: Address: City-St-Zip:	PD () DO DAVIS, ANTHONY 336 N.W. 7TH CT DEERFIELD BEAC	elete L.,		ADDITIONS/CHAN Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address:	PD () De DAVIS, ANTHONY 336 N.W. 7TH CT	elete L., CH, FL elete ET,		Title: Name: Address:		
Title: Name: Address:	PD () DE DAVIS, ANTHONY 336 N.W. 7TH CT DEERFIELD BEACH VD () DE DAVIS, MARGARE 336 N.W. 7TH CT	elete L., CH, FL elete ET, CH, FL elete		Title: Name: Address: City-St-Zip: Title: Name: Address:	() Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address: Address:	PD () DO DAVIS, ANTHONY 336 N.W. 7TH CT DEERFIELD BEACH VD () DO DAVIS, MARGARE 336 N.W. 7TH CT DEERFIELD BEACH SD () DO DAVIS, ELOISE, 640 N.W. 21ST CT	elete L., CH, FL elete T. H, FL elete J. H, FL elete J. J. Elete	8	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	() Change () Addition () Change () Addition	
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: Address:	PD () DO DAVIS, ANTHONY 336 N.W. 7TH CT DEERFIELD BEACH VD () DO DAVIS, MARGARE 336 N.W. 7TH CT DEERFIELD BEACH SD () DO DAVIS, ELOISE, 640 N.W. 21ST CT POMPANO BEACH D () DO BUTTS, TOMMIE E 6560 SW 8 ST	elete L., CH, FL elete T. H, FL elete 3 JR. ALE, FL 3306	8	Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	() Change () Addition () Change () Addition () Change () Addition	

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: ANTHONY L. DAVIS PD 04/13/2005