

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44943

FILED
Apr 16, 2009
Secretary of State

Entity Name: THE CHURCH OF BROTHERLY LOVE INC.

Current Principal Place of Business:

81 N. DEERFIELD AVE
STE 3
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

81 N. DEERFIELD AVE
STE 3
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 65-0268018

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DAVIS, ANTHONY L PASTOR
81 N DEERFIELD AVE.
SUITE 3
DEERFIELD BEACH, FL 33441 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: DAVIS, ANTHONY L.
Address: 336 N.W. 7TH CT
City-St-Zip: DEERFIELD BEACH, FL

Title: VD () Delete
Name: DAVIS, MARGARET
Address: 336 N.W. 7TH CT
City-St-Zip: DEERFIELD BEACH, FL

Title: SD () Delete
Name: DAVIS, ELOISE
Address: 640 N.W. 21ST CT.
City-St-Zip: POMPANO BEACH, FL

Title: D (X) Delete
Name: BUTTS, TOMMIE B JR.
Address: 6560 SW 8 ST
City-St-Zip: NORTH LAUDERDALE, FL 33068

Title: D () Delete
Name: BAKER, FANNIE
Address: 315 NW 7 CT
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: S () Delete
Name: HAWKINS, CHRISTINE
Address: 81 N DEERFIELD AVE STE 3
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, ANTHONY L.
Address: 336 N.W. 7TH CT
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: VD (X) Change () Addition
Name: DAVIS, MARGARET
Address: 336 N.W. 7TH CT
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD (X) Change () Addition
Name: DAVIS, ELOISE
Address: 640 N.W. 21ST CT.
City-St-Zip: POMPANO BEACH, FL 33441

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 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: ANTHONY L DAVIS

PD

04/16/2009

Electronic Signature of Signing Officer or Director

Date