FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 12 PM 12:05

DOCUMENT # **N94000006187 (8)**

1. Corporation Name

BAZIL HOWARD-BROWNE EVANGELISTIC MINISTRY, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
705 BARBERRY PLACE BRANDON FL 33510	705 BARBERRY PLACE BRANDON FL 33510

3. Date Incorporated or Qualified: 12/16/1994
3a. Date of Last Report: N/A
4. FEI Number: 59-3283879 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 1383 Oakfield Dr.	26 P.O. Box 2145
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Brandon, FL	City & State 28 Brandon, FL
Zip 24 33511 Country 25 U.S.A.	Zip 29 33509 Country 30 U.S.A.

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BING, ANITA K 100 S. ASHLEY DR. SUITE 2100 TAMPA FL 33602	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	☑ Change ☐ Addition
NAME	HOWARD-BROWNE, BAZIL	12 NAME	
STREET ADDRESS	705 BARBERRY PLACE	13 STREET ADDRESS	18544 Otterwood Dr.
CITY-ST-ZIP	BRANDON FL 33510	14 CITY-ST-ZIP	Tampa, FL 33647
TITLE	D	21 TITLE	☑ Change ☐ Addition
NAME	HOWARD-BROWNE, ANN M	22 NAME	
STREET ADDRESS	705 BARBERRY PLACE	23 STREET ADDRESS	18544 Otterwood Dr.
CITY-ST-ZIP	BRANDON FL 33510	24 CITY-ST-ZIP	Tampa, FL 33647
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	TRACY, DUANE	32 NAME	
STREET ADDRESS	2257 FLORENCE RD.	33 STREET ADDRESS	
CITY-ST-ZIP	KELLER TX 76262	34 CITY ST ZIP	
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	HOWARD-BROWNE, RODNEY	42 NAME	
STREET ADDRESS	17913 ST. CROIX ISLE DR.	43 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33647	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	HOUSE, TERRY L	52 NAME	
STREET ADDRESS	#2 VICTORY DR.	53 STREET ADDRESS	
CITY ST ZIP	PEVELY MO 63070	54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Bazil Howard-Browne Bazil Howard-Browne 4/7/95 (813)654-2550
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0000084