FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Jun 04 1998 8:00am

Secretary of State

DOCUMENT # N9500004673 (8)

CHURCH OF COMMUNITY SERVICE AND BROTHERHOOD INC. Principal Place of Business Mailing Address 10451 NE 125 AVENUE PO BOX 186 BRONSON FL 32891 ARCHER FL 32618-0186									
					3. Date Incorporated or Qualified 09/28/1995	3a. D	ate of Last 08/12/19	Report 96	
2. Principal P	Place of Business	2a. Mailing Address			4. FEL Number	<u> </u>	<u> </u>	Applied For	
21		26			NOT APPLICABLE Not Applied			lot Applicabl	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		> \$8.75 Additional Fee Required		
City & Stat	te	City & State			6. Election Campaign Financing		\$5.00) May Be	
23		28			Trust Fund Contribution			to Fees	
Zip Country		2 φ			8. This corporation has liability for intangible tax under s. 199.032,				
24	25	29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent				
	9. Name and Address of Curre	ani negistered Agent	81	1 Name	IV. Name and Address of New Ki	Aisteled	√Aau _I		
RDUMA:	BROWN, WILLIAM A., SR.]					
	, WILLIAM A., SR. IE 125 AVENUE		82	2 Street Add	dress (P.O. Box Number is Not Accepta	ble)			
	BRONSON FL 32691			3					
S. (\$1100	LIT I M APARI		84	000			To-T-2	Code	
			64	4 City		FL	 85 Zip	Code	
SIGNATURE	Signature, lyped or prictical name of registered as				rporation submits this statement for the alion's board of directors. I hereby acceured when reinstang) ADDITIONS/CHANGES TO OFFI	DATE			
TOTLE	P/D			· · · · · · ·			Change		
NAME	BROWN, WILLIAM A., SR.		1.2 NAME	;					
STREET ADDRESS	10451 NE 125 AVENUE		1.3 STREE	et address					
CITY-ST-ZIP	BRONSON FL 32691		1,4 CITY-	- ST - ZIP					
TITLE	P/D	☐ DFLETE	21 TITLE	ļ			Change	Additio	
NAME	LEWIS, REBECCA		2.2 NAME	1					
STREET ADDRESS	10451 NE 125 AVENUE BRONSON FL 32691			ET ADDRESS					
CITY-ST-ZIP TITLE	\$/D V (-R)/(-)	DELETE	2 4 CITY				Change	Additio	
NAME	BROWN, ANNA J.		3.2 NAME					_	
STREET ADDRESS	10451 NE 125 AVENUE		3.3 STREE	et address					
CITY-ST-ZIP	BRONSON FL 32691		3.4 CITY-	- ST - 7IP					
TITLE		☐ DELFTE	41 TITLE		· · · · — · — · — —		Change	Additio	
NAME			4. 2 NAM	I					
STREET ADDRESS				ET ADDRESS					
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NAME			5.2 NAME	J				_	
STREET ADDRESS				ET ADDRESS			υŞ	- 1 (
CITY-ST-ZIP			5.4 CITY-	1			Ç	, (4	
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NAME			6.2 NAME		-06/06/98010	ን ጨ ግሞል ባፈበ			
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14. Ido hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 auxiltachmont with an address.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

***70.00