## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N96000006071

Entity Name: J. L. BROWN MINISTRIES, INC.

FILED Mar 28, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

2640 OLD BAINBRIDGE ROAD TALLAHASSEE, FL 32303

**Current Mailing Address: New Mailing Address:** 

2184 GATES DRIVE TALLAHASSEE, FL 32312

FEI Number: 59-3504215 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

BROWN, JOSEPH L DR. 2184 GATES DRIVE

TALLAHASSEE, FL 32312 US

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:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

BROWN, JOSEPH L ELDER BROWN, JOSEPH L DR. Name: Name: Address: 2184 GATES DR. Address: 2184 GATES DR. City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32312

Title: ( ) Delete Title: () Change () Addition

Name: BROWN, EDNA S Name: Address: 2184 GATES DR. Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip:

Title: () Delete Title: (X) Change ( ) Addition

BROWN, JOSEPH II Name: EADY, HOPE Name:

2184 GATES DR. Address: Address: 673 WEST FOURTH AVENUE City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32304

Title: ( ) Delete Title: () Change () Addition

Name: MCELRATH, RONALD M ELDER Name: 6016 WOODSPRING DR. Address: Address: City-St-Zip: HOPE MILLS, NC 28348 City-St-Zip:

Title: () Delete Title: STD (X) Change ( ) Addition BROWN, JODIE D JOHNSON, DONDRIEC L Name: Name:

2184 GATES DR 3138 SOUTH FULMER CIRCLE Address: Address: City-St-Zip: TALLAHASSEE, FL 32172 City-St-Zip: TALLAHASSEE, FL 32303

Title: () Delete Title: (X) Change ( ) Addition

BROWN, JOEDRECKA S BROWN, JOEDRECKA S Name: Name: Address: 8 BELLEVIEW BLVD UNIT 202 Address: 8 BELLEVIEW BLVD UNIT 202

CHICAGO, IL 60302 City-St-Zip: BELLEAIR, FL 33756 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH L. BROWN PD 03/28/2006