

2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 17, 2011
Secretary of State

DOCUMENT# N97000001109

Entity Name: BROWN COMMUNITY DEVELOPMENT, INC.**Current Principal Place of Business:**706 DELL TOBIAS AVE
CLEWISTON, FL 33440**New Principal Place of Business:****Current Mailing Address:**706 DELL TOBIAS AVE
CLEWISTON, FL 33440**New Mailing Address:****FEI Number:** 65-0728461**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**BROWN, PRISCILLA B
706 DELL TOBIAS AVE
CLEWISTON, FL 33440 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
Name: BROWN, DWAYNE E
Address: 706 DELL TOBIAS AVE
City-St-Zip: CLEWISTON, FL 33440

Title: SD
Name: BROWN, PRISCILLA B
Address: 706 DELL TOBIAS AVE
City-St-Zip: CLEWISTON, FL 33440

Title: TD
Name: WILLIAMS, ELGENETTE
Address: 1131 FLORIDA AVENUE
City-St-Zip: CLEWISTON, FL 33440

Title: M
Name: HARPER, INDIA
Address: 706 DELLA TOBIAS AVE.
City-St-Zip: CLEWISTON, FL 33440

Title: M
Name: SUMMERSETT, DARYLE
Address: 706 DELLA TOBIAS AVE
City-St-Zip: CLEWISTON, FL 33440

I hereby 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 all other like empowered.

SIGNATURE: PRISCILLA B. BROWN

SD

05/17/2011

Electronic Signature of Signing Officer or Director

Date