2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005359

Entity Name: R. L. BROWNE MINISTRIES, INC.

FILED Feb 25, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

216 BAYBERRY DRIVE 4200 S.W. 54TH COURT PLANTATION, FL 33317 DANIA BEACH, FL 33314

Current Mailing Address: New Mailing Address:

216 BAYBERRY DRIVE 4200 S.W. 54TH COURT PLANTATION, FL 33317 DANIA BEACH, FL 33314

FEI Number: 65-0781253 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

BROWNE, LYNDA J NEW WINESKIN FAMILY MINISTRIES 216 BAYBÉRRY DRIVE 4200 S.W. 54TH COURT DANIA BEACH, FL 33314 PLANTATION, FL 33317 US 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: LORIN BROWNE 02/25/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BROWNE, REGINALD L DR BROWNE, LORIN ED.D. Name: Name: 216 BAYBERRY DRIVE Address: 4200 S.W. 54TH COURT Address: City-St-Zip:

PLANTATION, FL 33317 City-St-Zip: DANIA BEACH, FL 33314

Title: () Delete Title: (X) Change () Addition Name: BROWNE, LYNDA J Name: BROWNE, LYNDA

Address: 216 BAYBERRY DRIVE Address: 216 BAYBERRY DRIVE City-St-Zip: PLANTATION, FL 33317 City-St-Zip: PLANTATION, FL 33317

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

MULLINGS, ANTHONY Name: Name: 12856 S.W. 28TH SOURT Address: Address: City-St-Zip: MIRAMAR, FL 33027 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: LORIN BROWNE CD 02/25/2009