

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90100 020 ****70.00

DOCUMENT # N98000003751

1. Entity Name
E & Y BRINSON MINISTRIES, INC.



Principal Place of Business
**2800 W PROSPECT ROAD
FORT LAUDERDALE, FL 33309**

Mailing Address
**2800 W PROSPECT ROAD
FORT LAUDERDALE, FL 33309**

DO NOT WRITE IN THIS SPACE



04282005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0851018	Applied For Not Applicable
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5. Certificate of Status Desired	<input checked="" type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent

**BRINSON, EDWARD G
2800 W PROSPECT ROAD
FORT LAUDERDALE, FL 33309**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINSON, EDWARD G 12699 CLASSIC DR CORAL SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINSON, YVETTE M 12699 CLASSIC DR CORAL SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BROOKS, LASHAON 5770 LAKESIDE DR CORAL SPRINGS, FL
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like powers.

SIGNATURE:

Edward Brinson **Edward Brinson**

4/28/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #