

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761355

Entity Name: EASTSIDE BROTHERHOOD CLUB, INC.**Current Principal Place of Business:**917 A PHILIP RANDOLPH BLVD.
JACKSONVILLE, FL 32206**Current Mailing Address:**P O BOX 77438
JACKSONVILLE, FL 32226 US**FEI Number:** 59-2537604**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**PETTWAY, WILLE
917 A PHILLIP RANDOLPH BLVD.
JACKSONVILLE, FL 32226 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:** WILLE PETTWAY

02/17/2015

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title OFFICER
Name BROWN, THEODORE
Address 1138 RADIS PL
City-State-Zip: JACKSONVILLE FL 32209

Title OFFICER
Name SMALL, CHARLES
Address 1244 GRANT STREET
City-State-Zip: JACKSONVILLE FL 32206

Title DIRECTOR
Name COLLIER, DALE A
Address 12317 CRYSTAL CREEK CT.
City-State-Zip: JACKSONVILLE FL

Title TD
Name KEYES, WILLIE
Address 4119 LEONARD CT WEST
City-State-Zip: JACKSONVILLE FL 32209

Title D
Name ALEXANDER, JOSEPH JR
Address 11318 LAMBORGHINI CT.
City-State-Zip: JACKSONVILLE FL 32246

Title DIRECTOR
Name BULLOCK, JOSEPH
Address 917 A.PHILLIP RANDOLPH
APT,1
City-State-Zip: JACKSONVILLE FL 32206

Title SECRETARY
Name PRIDGEN, ROBERT
Address 1716 E.28TH ST.
City-State-Zip: JACKSONVILLE FL

Title ASST. SECRETARY
Name CROSS, DERICK
Address 1112 BRIDIER ST.
City-State-Zip: JACKSONVILLE FL

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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: DALE A. COLLIER

DIR.

02/17/2015

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CHAPLIN
Name HOLMES, DAVID E SR.
Address 7409 RICHARDSON HT.PI.
City-State-Zip: JACKSONVILLE FL

Title PRESIDENT
Name PETTWAY, WILLIE
Address P.O.BOX 774338
City-State-Zip: JACKSONVILLE FL

Title OFFICER
Name PATE, CECIL
Address 312 W.67TH ST.
City-State-Zip: JACKSONVILLE FL 32209

Title OFFICER
Name PALAMORE, JAMES H
Address 1737 TYLER ST.
City-State-Zip: JACKSONVILLE FL 32209

Title OFFICER
Name PINKNEY, MILTON
Address 1138 E.1ST.
City-State-Zip: JACKSONVILLE FL 32206

Title OFFICER
Name ABRAM, WILLIAM J
Address 1133 FRANKLIN ST
City-State-Zip: JACKSONVILLE FL 32206

Title OFFICER
Name WILLIAMS, HAROLD
Address 1151 VAN BUREN ST.
City-State-Zip: JACKSONVILLE FL 32206

Title OFFICER
Name TOWNSEND, FERNANDO
Address 7965 AUSTIN RD
City-State-Zip: JACKSONVILLE FL 00000

Title DIRECTOR
Name WOODEN, MELVIN
Address 1114 FRANKLIN ST.
City-State-Zip: JACKSONVILLE FL 32206

Title OFFICER
Name WESTON, WILLIAM
Address 1533 PULLEN RD.
APT.3
City-State-Zip: JACKSONVILLE FL

Title DIRECTOR
Name SMITH, LINWOOD
Address 13000 BROXTON,BAY DR.
City-State-Zip: JACKSONVILLE FL

Title VP
Name THOMAS, WARREN
Address PO BOX318
City-State-Zip: LAWTEY FL 00000

Title OFFICER
Name VEREEN, LONNIE JR.
Address P.O.BOX 32209
City-State-Zip: JACKSONVILLE FL 32209

Title OFFICER
Name GRAHAM, MARION
Address P.O.BOX
City-State-Zip: JACKSONVILLE FL 32206

Title OFFICER
Name ADAMS, MICHEAL
Address 1131 EVERGREEN ST.
City-State-Zip: JACKSONVILLE FL

Title OFFICER
Name ROBINSON, ELBERT L
Address 736 BONNPART DR.
City-State-Zip: JACKSONVILLE FL 00000