

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04291

FILED
Apr 15, 2013
Secretary of State
CC2141808151

Entity Name: SOCIETY FOR THE IMPROVEMENT OF BROTHERHOOD
INCORPORATED**Current Principal Place of Business:**

% SAM AUSTIN JR.
222 PONCE DE LEON ST
ROYAL PALM BEACH, FL 33411

Current Mailing Address:

% SAM AUSTIN JR.
222 PONCE DE LEON ST
ROYAL PALM BEACH, FL 33411 US

FEI Number: 59-2608137**Certificate of Status Desired: Yes****Name and Address of Current Registered Agent:**

AUSTIN, SAM JR.
222 PONCE DE LEON ST
ROYAL PALM BEACH, FL 33411 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**Officer/Director Detail :**

Title PRESIDENT
Name YOUNG, W. FRED
Address 3915 TORRES CIRCLE
City-State-Zip: WEST PALM BEACH FL 33409

Title OFFICER
Name WADE, EDWIN
Address 2359 AVENUEZ
City-State-Zip: RIVIERA BEACH FL 33404

Title OFFICER
Name SANDERS, CHRIS
Address 4517 S.W. BABYLON STREET
City-State-Zip: PORT ST. LUCIE FL 34953

Title ASST. SECRETARY
Name MEEKS, WILLIE
Address 371 22ND CT
City-State-Zip: RIVIERA BCH FL 33404

Title CORRESPONDING SECRETARY
Name AUSTIN, SAM
Address 222 PONCE DE LEON STREET
City-State-Zip: ROYAL PALM BEACH FL 33411

Title D
Name REID, EDWARD
Address 1189 WEST 31ST ATREET
City-State-Zip: RIVIERA BEACH FL 33404

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: W FRED VYOUNG**PRESIDENT****04/15/2013**_____
Electronic Signature of Signing Officer/Director Detail_____
Date