

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708161

FILED
Jan 31, 2006
Secretary of State

Entity Name: HOME BUILDERS AND CONTRACTORS ASSOCIATION OF BREVARD, INC.

Current Principal Place of Business:

1500 W. EAU GALLIE BLVD.
STE. A
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

1500 W. EAU GALLIE BLVD.
STE A
MELBOURNE, FL 32935 US

New Mailing Address:

FEI Number: 59-1448721 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAISER, FRANCK H
1500 W. EAU GALLIE BLVD.
MELBOURNE, FL 32935 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: CEO () Delete
Name: KAISER, FRANCK H
Address: 1500 W. EAU GALLIE BLVD., SUITE A
City-St-Zip: MELBOURNE, FL 32935

Title: PD () Delete
Name: GROVER, KEITH
Address: 1801 PENN ST SUITE 1A
City-St-Zip: MELBOURNE, FL 32901

Title: VD () Delete
Name: SIMMS, DON
Address: 2825 BUSINESS CENTER DR C1
City-St-Zip: MELBOURNE, FL 32940

Title: TD () Delete
Name: SEWELL, NANCY
Address: 82 N ATLANTIC AVE
City-St-Zip: COCOA BEACH, FL 32931

Title: SD () Delete
Name: PHILMAN, PERCY
Address: 1200 LAKE WASHINGTON RD
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: MORRIS, TOM
Address: 235 WEST DR
City-St-Zip: MELBOURNE, FL 32904

Title: VD (X) Change () Addition
Name: FLEIS, JERRY
Address: 2060 HIGHWAY A1A SUITE 309
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: BOWES, MARK
Address: 4610 LIPSCOMB STREET NE
City-St-Zip: PALM BAY, FL 32905

I hereby certify that the information supplied with this filing does not qualify for the 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: NANCY SEWELL

TD

01/31/2006

Electronic Signature of Signing Officer or Director

Date