

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710093

FILED
Mar 13, 2006
Secretary of State

Entity Name: THE ARC OF BREVARD, INC.

Current Principal Place of Business:

1694 CEDAR STREET
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1694 CEDAR STREET
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-0905505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDSON, LYNN
3804 LA FLOR DRIVE
ROCKLEDGE, FL 32955 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: T () Delete
Name: PRINGLE, J R
Address: 1182 POTOMAC DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: S () Delete
Name: COLLINS, SUSAN
Address: 152 WINDWARD WAY
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: D () Delete
Name: COLUMBO, JOSEPH
Address: 2351 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: C () Delete
Name: DROPSKI, CYNDI
Address: 680 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: VCD () Delete
Name: HAMENT, ANDY
Address: P.O. BOX 1870
City-St-Zip: MELBOURNE, FL 329021870

Title: D () Delete
Name: MYERS, JIM
Address: 750 N. ATLANTIC BLVD. , SUITE 604
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change () Addition
Name: BOUCHER, M
Address: 3826 MURRELL ROAD
City-St-Zip: ROCKLEDGE, FL 32955

Title: C (X) Change () Addition
Name: COLLINS, SUSAN
Address: 152 WINDWARD WAY
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

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

Title: D (X) Change () Addition
Name: DROPSKI, CYNDI
Address: 680 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: S (X) Change () Addition
Name: SABBAG, BRENDA
Address: 3470 N. HARBOR CITY BLVD.
City-St-Zip: ROCKLEDGE, FL 32935

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

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: LYNN HUDSON

CFO

03/13/2006

Electronic Signature of Signing Officer or Director

Date