2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2005
Secretary of State

DOCUMENT# 738709

Entity Name: 211BREVARD, INC.

Current Principal Place of Business:

625 FLORIDA AVE
COCOA, FL 32922 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 417
COCOA, FL 329230417 US

New Mailing Address:

FEI Number: 59-1897447 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DONOGHUE, ELIZABETH B
2800 WATKINS DR.
MELBOURNE, FL 32901 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:	P	( ) Delete
Name:	MCLOUTH, MALCOLM	
Address:	C/O CANAVERAL PORT AUTHORITY PO BOX 267	
City-St-Zip:	CAPE CANAVERAL, FL 32920	
Title:	T	( ) Delete
Name:	DALTON, MEGHAN E	
Address:	507 ISLAND COURT	
City-St-Zip:	INDIAN HARBOUR BEACH, FL 32937	
Title:	D	( ) Delete
Name:	MARSH, ANNA	
Address:	2010 ADAMS AVE	
City-St-Zip:	MELBOURNE, FL 32935	
Title:	D	( ) Delete
Name:	CRAWFORD, CHARLES	
Address:	C/O BREVARD SHERIFF'S OFFICE, 700 PARK AVE	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	D	( ) Delete
Name:	RYAN, GERRY	
Address:	1670 S. FISKE BLVD	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	D	( ) Delete
Name:	BABB, RHONDA E	
Address:	1919 FABIEN CIRCLE	
City-St-Zip:	MELBOURNE, FL 32940	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	P	(X) Change ( ) Addition
Name:	MCLOUTH, MALCOLM	
Address:	5304 N. ATLANTIC AVE	
City-St-Zip:	CAPE CANAVERAL, FL 32920	
Title:	T	(X) Change ( ) Addition
Name:	ROGERO, DENNIS E	
Address:	1392 HAMPTON PARK LANE	
City-St-Zip:	VIERA, FL 32940	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	BOUDRIE, JOYCE	
Address:	222 SAND PINE CT.	
City-St-Zip:	INDIALANTIC, FL 32903	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
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 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 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: ELIZABETH B DONOGHUE EXDR 04/13/2005

Electronic Signature of Signing Officer or Director — Date