2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738709

Entity Name: 211BREVARD, INC.

FILED Apr 11, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:

625 FLORIDA AVE 625 FLORIDA AVE

US COCOA, FL 32922 SUITE 4

COCOA, FL 32922 US

Current Mailing Address: New Mailing Address:

P.O. BOX 417

COCOA, FL 329230417 US

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

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DONOGHUE, ELIZABETH B 2800 WATKINS DR. MELBOURNE, FL 32901 US

OFFICERS AND DIRECTORS:

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:

Date

Electronic Signature of Registered Agent

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition

MCLOUTH, MALCOLM BABB, RHONDA Name: Name: 5304 N. ATLANTIC AVE Address: 51 S. NEIMAN AVE Address: City-St-Zip: CAPE CANAVERAL, FL 32920 City-St-Zip: MELBOURNE, FL 32901

Title: () Delete Title: () Change () Addition

Name: ROGERO, DENNIS E Name: Address: 1392 HAMPTON PARK LANE Address: City-St-Zip: VIERA, FL 32940 City-St-Zip:

Title: () Delete Title: () Change () Addition

MARSH, ANNA Name: Name: 2010 ADAMS AVE Address: Address: City-St-Zip: MELBOURNE, FL 32935 City-St-Zip:

Title: () Delete Title: () Change () Addition

Name: BOUDRIE, JOYCE Name: 222 SAND PINE CT. Address: Address: City-St-Zip: INDIALANTIC, FL 32903 City-St-Zip:

Title: () Delete Title: (X) Change () Addition

RYAN, GERRY MCLOUTH, MALCOLM Name: Name: 1670 S. FISKE BLVD 5304 N. ATLANTIC AVE. Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: COCOA BEACH, FL 32931

Title: () Delete Title: (X) Change () Addition

BABB, RHONDA E GOBELI. STEVE Name: Name: Address: 1919 FABIEN CIRCLE Address: 1699 PALM RIDGE ROAD MELBOURNE, FL 32940 MELBOURNE, FL 32935 City-St-Zip: 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: ELIZABETH B. DONOGHUE MS. 04/11/2006