741921

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(Re	equestor's Name)	l
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PICK-UP	☐ WAIT	MAIL
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SECRETARY OF STATE TALLAHASSEE. FLORIDA

DR 5/8/09

COVER LETTER

Division of Corporations		1	
SUBJECT: Brevard Art Museum	Name of Corporation)	D	
DOCUMENT NUMBER: 7	41921		
The enclosed Statement of Change of Reg	istered Office/Agent and fee are su	abmitted for filing.	
Please return all correspondence concernit	ng this matter to the following:		
•	3		
	Laura Settembrino		
(Name of Contact Person)		
Brevard Art Museum			
	(Firm/Company)		
	4400 15-6-1-1-1-1-4		
1463 Highland Ave. (Address)			
	,		
Melhourne El 32935			
Melbourne, FL 32935 (City/State and Zip Code)			
For further information concerning this ma	iter, please call:		
Laura Dattambri		10.0707	
Laura Settembrino (Name of Contact Person)	at (<u>321</u>) 2 (Area Code &)	42-0737 Daytime Telephone Number)	
	,	,	
Enclosed is a \$35.00 check made payable	to the Department of State.		
Mailing Address: Amendment Sect	ion Street Add Amendmen	ress:	
Amendment Sect Division of Corp		nt Section f Corporations	
P.O. Box 6327	Clifton Bu		
Tallahassee, FL		utive Center Circle	
		e, FL 32301	

, STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508. Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Brevard Art Museum Inc.
2. The principal office address: 1463 Highland Ave., Melbourne, FL 32935
3. The mailing address (if different):
4. Date of incorporation/qualification: 3878 Document number: 741921
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
Karl Hollander - Resigned
Karl Hollander - Resigned 1463 Highland Are Melbourne FL 32935
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Steven Maklansky
1463 Highland Ave. (P.O. Box NOT acceptable)
Melbourne, FL 32935
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Susan Hopkins (Signature of an officer or grector) Susan Hopkins (Printed or typed name and title)
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) 3/13/09 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

Make Checks payable to Florida Department of State
Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

* * * FILING FEE: \$35.00 * * *