

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**May 05, 2011**  
**Secretary of State**

DOCUMENT# 768558

**Entity Name:** BREVARD REGIONAL ARTS GROUPS, INC.**Current Principal Place of Business:**625 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901 US**New Principal Place of Business:****Current Mailing Address:**625 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901 US**New Mailing Address:****FEI Number:** 59-2306612**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**BRANDON, WENDY  
103 LANDSING ISLAND DR  
INDIAN HARBOUR BEACH, FL 32937 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:** PD  
**Name:** SAYLORS-MILUCKY, LEEANN  
**Address:** P O BOX 500158  
**City-St-Zip:** MALABAR, FL 32950**Title:** VPD  
**Name:** MOTTICE, JUDY S  
**Address:** 2070 MEADOWLANE AVENUE  
**City-St-Zip:** MELBOURNE, FL 32904**Title:** TD  
**Name:** BRANDON, WENDY  
**Address:** 103 LANDSING ISLAND DR  
**City-St-Zip:** INDIAN HARBOUR BEACH, FL 32937**Title:** SD  
**Name:** WALLIS, MARY  
**Address:** 841 OAKWOOD DR  
**City-St-Zip:** MELBOURNE, FL 32940

I hereby 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 all other like empowered.

SIGNATURE: JUDY S MOTTICE

VP

05/05/2011

Electronic Signature of Signing Officer or Director

Date