

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000003491

FILED
Apr 28, 2005
Secretary of State

Entity Name: PROJECT LIGHT OF BREVARD, INC.

Current Principal Place of Business:

1384 ROSEMARY DR.
MERRITT ISLAND, FL 32953

New Principal Place of Business:

1384 ROSEMARY DR.
MELBOURNE, FL 32935

Current Mailing Address:

PO BOX 361071
MELBOURNE, FL 329361071

New Mailing Address:

FEI Number: 59-3727406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

WALDRON, TOM D ESQ.
112 WEST NEW HAVEN AVENUE
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: D () Delete
Name: SUMMERFORD, IRENE
Address: 1800 BUNCHE STREET
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: EMERSON, ANITA
Address: 602 CASA GRANDE DRIVE
City-St-Zip: MELBOURNE, FL 32940

Title: D () Delete
Name: RICHARDSON, SANDRA
Address: 1532 MASTERS ROAD NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: CLINE, BURTON
Address: 482 WATERBROOK STREET
City-St-Zip: MELBOURNE, FL 32934

Title: D () Delete
Name: MICHALIK, KENTON
Address: 1384 ROSEMARY DRIVE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: KENTON L. MICHALIK

D

04/28/2005

Electronic Signature of Signing Officer or Director

_____ Date