

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 13, 2007
Secretary of State

DOCUMENT# N01000003491

Entity Name: PROJECT LIGHT OF BREVARD, INC.

Current Principal Place of Business:

2885 ELECTRONICS DR.
STE. D-14
MELBOURNE, FL 32935

New Principal Place of Business:

1619 FERNDALE AVE.
MELBOURNE, FL 32935

Current Mailing Address:

2885 ELECTRONICS DR
STE. D-14
MELBOURNE, FL 32935

New Mailing Address:

1619 FERNDALE AVE.
MELBOURNE, FL 32935

FEI Number: 59-3727406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WALDRON, TOM D ESQ.
112 WEST NEW HAVEN AVENUE
MELBOURNE, FL 32901 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

Title: D () Delete
Name: COLLINS, MATTHEW
Address: 608 OXFORD AVE.
City-St-Zip: MELBOURNE, FL 32935

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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: ANITA EMERSON

D

08/13/2007

Electronic Signature of Signing Officer or Director

_____ Date