

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10367

FILED
Mar 02, 2011
Secretary of State

Entity Name: FRIENDS OF CHILDREN OF BREVARD COUNTY, INC.

Current Principal Place of Business:

2825 JUDGE FRAN JAMIESON WAY
C/O GAL OFFICE
VIERA, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

2825 JUDGE FRAN JAMIESON WAY
C/O GAL OFFICE
VIERA, FL 32940 US

New Mailing Address:

FEI Number: 59-3175485 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

DIMEL, MARY
1670 SANDPIPER STREET
MERRITT ISLAND, FL 32952 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: P-D
Name: SHOOK, SONNA
Address: C/O GAL OFF 2825 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940 US

Title: VP-D
Name: MILLER, SANDY
Address: C/O GAL OFF 2825 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940 US

Title: S-D
Name: KENNEDY, WILLIAM
Address: C/O GAL OFF 2825 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940 US

Title: T-D
Name: DIMEL, MARY
Address: C/O GAL OFF 2825 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940 US

Title: D
Name: JONES, LACHRISTA
Address: C/O GAL OFF 2825 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, 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: MARY DIMEL

T-D

03/02/2011

Electronic Signature of Signing Officer or Director

Date