

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000100870

FILED  
Feb 10, 2006  
Secretary of State

Entity Name: BREVARD HOME SCHOOL ACADEMY, INC.

## Current Principal Place of Business:

276 MCLEOD STREET  
MERRITT ISLAND, FL 32927

## New Principal Place of Business:

276 MCLEOD STREET  
MERRITT ISLAND, FL 32953 US

## Current Mailing Address:

276 MCLEOD STREET  
MERRITT ISLAND, FL 32927

## New Mailing Address:

556 HIDDEN HOLLOW DRIVE  
MERRITT ISLAND, FL 32952 US

FEI Number: 59-3679137

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

SHAYKHIAN, CHEREE  
276 MCLEOD STREET  
MERRITT ISLAND, FL 32927 US

## Name and Address of New Registered Agent:

SHAYKHIAN, CHEREE PRES  
276 MCLEOD STREET  
MERRITT ISLAND, FL 32953 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: CHEREE SHAYKHIAN

02/10/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: SHAYKHIAN, CHEREE  
Address: 276 MCLEOD STREET  
City-St-Zip: MERRITT ISLAND, FL 32927

Title: D (X) Delete  
Name: VOGT, CHRISTENE  
Address: 276 MCLEOD STREET  
City-St-Zip: MERRITT ISLAND, FL 32927

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change ( ) Addition  
Name: SHAYKHIAN, CHEREE PRES  
Address: 276 MCLEOD STREET  
City-St-Zip: MERRITT ISLAND, FL 32953

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHEREE SHAYKHIAN

PRES

02/10/2006

Electronic Signature of Signing Officer or Director

Date