

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000094239

FILED  
Jan 20, 2010  
Secretary of State

**Entity Name:** TAXMASTERS OF BREVARD, INC.

**Current Principal Place of Business:**

8085 SPYGLASS HILL RD.  
VIERA, FL 32940

**New Principal Place of Business:**

**Current Mailing Address:**

8085 SPYGLASS HILL RD.  
VIERA, FL 32940

**New Mailing Address:**

**FEI Number:** 20-3085486

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

LOMBARD, SHERRI  
8085 SPYGLASS HILL RD.  
VIERA, FL 32940 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: P  
Name: LOMBARD, SHERRI  
Address: 5192 OUTLOOK DRIVE  
City-St-Zip: MELBOURNE, FL 32940

Title: VP  
Name: LOMBARD, RALPH  
Address: 5192 OUTLOOK DRIVE  
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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHERRI LOMBARD

PRES

01/20/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date