

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36890

FILED
Mar 17, 2009
Secretary of State

Entity Name: GREENBRIAR PLACE HOMEOWNERS ASSOCIATION OF BREVARD, INC.

Current Principal Place of Business:

P.O. BOX 361214
MELBOURNE, FL 32936

New Principal Place of Business:

1998 TREVINO CIR
MELBOURNE, FL 32935

Current Mailing Address:

P.O. BOX 361214
MELBOURNE, FL 32936

New Mailing Address:

FEI Number: 59-2994774 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MEANS, SCOTT
1998 TREVINO CIR
MELBOURNE, FL 32935 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: THOMAS, WALSH
Address: 2016 TREVINO CIR
City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete
Name: MEANS, SCOTT K.,
Address: 1998 TREVINO CIR.
City-St-Zip: MELBOURNE, FL 32935

Title: DP () Delete
Name: KELLEY, MICHAEL
Address: 1909 TREVINO CIR
City-St-Zip: MELBOURNE, FL 32935

Title: S () Delete
Name: KELLEY, DEBBIE
Address: 1909 TREVINO CIR
City-St-Zip: MELBOURNE, FL 32935

Title: DV () Delete
Name: MILLER, JOHN
Address: 2032 TREVINO CIR
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: S (X) Change () Addition
Name: KELLEY, MEGAN
Address: 1909 TREVINO CIR
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: SCOTT K. MEANS

T

03/17/2009

Electronic Signature of Signing Officer or Director

Date