### 2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 708161** 

Entity Name: HOME BUILDERS AND CONTRACTORS ASSOCIATION OF

BREVARD, INC.

Apr 30, 2020 Secretary of State 5744029415CC

**FILED** 

### **Current Principal Place of Business:**

1500 W. EAU GALLIE BLVD.

STE. A-2

MELBOURNE, FL 32935

## **Current Mailing Address:**

1500 W. EAU GALLIE BLVD.

STE A-2

Title

MELBOURNE, FL 32935 US

FEI Number: 59-1448721 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MILLER, ERIN 1500 W. EAU GALLIE BLVD. STE, A-2 MELBOURNE, FL 32935 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: ERIN MILLER 04/30/2020

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title TREASURER Title IMMEDIATE PAST PRESIDENT

Name CARAWAY, ROMAN Name MASLINE, MICHELLE

Address 1500 W. EAU GALLIE BLVD. Address 1500 W. EAU GALLIE BLVD.

STE. A-2 STE. A-2

City-State-Zip: MELBOURNE FL 32935 City-State-Zip: MELBOURNE FL 32935

Title VP, SECOND Title SECRETARY

Name CARTAGENA-SPENCER, NATASHA Name DIBELLA, BOB

Address 1500 W. EAU GALLIE BLVD. Address 1500 W. EAU GALLIE BLVD.

STE. A-2 STE. A-2

City-State-Zip: MELBOURNE FL 32935 City-State-Zip: MELBOURNE FL 32935

TitleBUILDER DIRECTORTitlePRESIDENTNameHALAS, JIMNameLEWIS, TREVOR

Address 1500 W. EAU GALLIE BLVD. Address 1500 W. EAU GALLIE BLVD.

STE, A-2 STE, A-2

City-State-Zip: MELBOURNE FL 32935 City-State-Zip: MELBOURNE FL 32935

Name JOYAL, PAUL Name OXLEY, BRAD

Address 1500 W. EAU GALLIE BLVD. Address 1500 W. EAU GALLIE BLVD.

STE. A-2 STE. A-2

City-State-Zip: MELBOURNE FL 32935 City-State-Zip: MELBOURNE FL 32935

### Continues on page 2

ASSOCIATE DIRECTOR

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.

Title

SIGNATURE: TREVOR LEWIS PRESIDENT 04/30/2020

SENIOR LIFE DIRECTOR

# Officer/Director Detail Continued:

Title ASSOCIATE DIRECTOR

Name MCCARTHY, ANDREA

Address 1500 W. EAU GALLIE BLVD.

STE. A-2

City-State-Zip: MELBOURNE FL 32935

Title ASSOCIATE DIRECTOR

Name CULP, SHELLEY

Address 1500 W. EAU GALLIE BLVD.

STE. A-2

City-State-Zip: MELBOURNE FL 32935

Title ASSOCIATE DIRECTOR

Name MOIA, BRUCE

Address 1500 W. EAU GALLIE BLVD.

STE A-2

City-State-Zip: MELBOURNE FL 32935

Title VP, FIRST

Name SLATE, CHRISTINA

Address 1500 W. EAU GALLIE BLVD.

STE. A-2

City-State-Zip: MELBOURNE FL 32935

Title GENERAL COUNCIL
Name REZANKA, KIMBERLY

Address 1500 W. EAU GALLIE BLVD.

STE. A-2

City-State-Zip: MELBOURNE FL 32935