

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 738709

Entity Name: 211BREVARD, INC.**Current Principal Place of Business:**1007 PATHFINDER WAY
SUITE 120
ROCKLEDGE, FL 32955**Current Mailing Address:**P.O. BOX 561627
ROCKLEDGE, FL 32956 US**FEI Number:** 59-1897447**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DONOGHUE, ELIZABETH B
1007 PATHFINDER WAY
SUITE 120
ROCKLEDGE, FL 32955 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	DIRECTOR
Name	SMITH, GREG
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	CEO
Name	DONOGHUE, ELIZABETH B
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	DIRECTOR
Name	SINGLETON, DAN
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	PRESIDENT
Name	DEROY, GREG
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	TREASURER
Name	KNOWLTON, DAVID
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	VP
Name	ROBINSON, SCOTT
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

Title	DIRECTOR
Name	EVANS, RYAN
Address	P.O. BOX 561627
City-State-Zip:	ROCKLEDGE FL 32956

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: ELIZABETH B. DONOGHUE**EXECUTIVE DIRECTOR****04/13/2021**_____
Electronic Signature of Signing Officer/Director Detail_____
Date