#### **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 764409** 

Entity Name: GENEALOGICAL SOCIETY OF NORTH BREVARD, INC.

FILED Feb 26, 2013 Secretary of State CC3649958589

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

5630 BOBWHITE TRAIL MIMS. FL 32754

## **Current Mailing Address:**

PO BOX 897

TITUSVILLE, FL 32781

FEI Number: 59-2105546 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

MARTHA, NOFFEL R 5630 BOBWHITE TRAIL MIMS, FL 32754 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 PD Title

 Name
 SWAN, EDWARD
 Name
 MALONEY, BARBARA

 Address
 257 HARMONY LANE
 Address
 1481 N US 1, LOT #103

 City-State-Zip:
 TITUSVILLE FL 32780
 City-State-Zip:
 TITUSVILLE FL 32780

Title T Title S

NameNOFFEL, MARTHA R.NameMACRAE, BEVERLYAddress5630 BOB WHITE TRAILAddress4260 PIEDRAS STREETCity-State-Zip:MIMS FL 32754City-State-Zip:COCOA FL 32927

Title HIST

Name BENDEN, CHARLEEN
Address 4495 BROWNING AVENUE
City-State-Zip: TITUSVILLE FL 32780

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: MARTHA R. NOFFEL

Electronic Signature of Signing Officer/Director Detail

**TREASURER** 

VD

02/26/2013