

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000001574

**FILED**  
**Jan 22, 2020**  
**Secretary of State**  
**1179578753CC**

**Entity Name:** BREVARD RESCUE MISSION, INC.

**Current Principal Place of Business:**

1230 N HARBOR CITY BLVD  
MELBOURNE, FL 32935

**Current Mailing Address:**

PO BOX 362203  
MELBOURNE, FL 32936 US

**FEI Number:** 26-1686406

**Certificate of Status Desired:** No

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

GLAVAS, STACIA  
1230 N HARBOR CITY BLVD  
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:** STACIA GLAVAS

01/22/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title MS.  
Name GLAVAS, STACIA  
Address 527 ROCKLEDGE DR.  
City-State-Zip: ROCKLEDGE FL 32955

Title MRS.  
Name MCNEIGHT, TERESA  
Address 253 LANSING ISLAND DRIVE  
City-State-Zip: SATELLITE BEACH FL 32937

Title MR.  
Name JOHNSON, LIEF  
Address 1870 BLUE HERON DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title MRS.  
Name SHOULTZ, MICHELLE  
Address 728 KIWI CT  
City-State-Zip: INDIALANTIC FL 32903

Title MRS.  
Name PAULK, KATHY  
Address 3043 NINA COURT  
City-State-Zip: MERRITT ISLAND FL 32953

Title MRS.  
Name SORENSEN, JOAN  
Address 3930 HIDDEN OAKS LN  
City-State-Zip: MELBOURNE FL 32934

Title MRS.  
Name SPENCER, NATASHA  
Address 890 SPANISH WELLS DR  
City-State-Zip: MELBOURNE FL 32934

Title MR.  
Name NABERHAUS, ROB  
Address 8160 S TROPICAL TRL  
City-State-Zip: MERRITT ISLAND FL 32952

**Continues on page 2**

*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:** STACIA GLAVAS

**CEO/FOUNDER**

01/22/2020

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title MR.  
Name HECKER, EDWARD  
Address 6769 N. WICKHAM RD  
STE. B100  
City-State-Zip: MELBOURNE FL 32940

Title MS.  
Name NASSAR, JOAN  
Address 3684 N WICKHAM RD  
STE. B  
City-State-Zip: MELBOURNE FL 32935

Title MR.  
Name GREEN, DAVID  
Address 1391 LEMUR LN  
City-State-Zip: MELBOURNE FL 32940

Title MR.  
Name ADAMS, JOSHUA  
Address 1370 SARNO RD.  
STE. G  
City-State-Zip: MELBOURNE FL 32935

Title MR.  
Name BROLINE, ROB  
Address 284 ORGANZA PL  
City-State-Zip: CHULUOTA FL 32766-6028