

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000001574

Entity Name: BREVARD RESCUE MISSION, INC.

Current Principal Place of Business:

1222 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:

LYON, AMY
1222 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: AMY LYON

03/20/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

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

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

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

Title SECRETARY
Name KRIETE, JENNIFER
Address 303 1ST AVE
City-State-Zip: INDIALANTIC FL 32903

Title CHAIR
Name HAGY, DUSTIN
Address 3636 AYRSHIRE CIR
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR
Name AMGOTT, COLLEEN
Address 3630 MALLIE CT
City-State-Zip: MELBOURNE FL 32934

Title DIRECTOR
Name SMITH, CHUCK
Address 93 DELANNOY AVE APT 1101
City-State-Zip: COCOA FL 32922

Title DIRECTOR
Name DOWNS, KEVIN
Address 8505 S TROPICAL TRL
City-State-Zip: MERRITT ISLAND FL 32952

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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: AMY LYON

CEO

03/20/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CADORE, MICHAEL
Address 1222 N HARBOR CITY BLVD
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name BOLGER, SAMI
Address 1222 N HARBOR CITY BLVD
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name TALBOT, KRISTINA
Address 856 ORANGE BLOSSOM DR
City-State-Zip: MELBOUREN FL 32935

Title DIRECTOR
Name LYON, AMY
Address 1222 N HARBOR CITY BLVD
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name STEVE, BIERBRUNNER
Address 1222 N HARBOR CITY BLVD
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name SIBLEY, DEDRA
Address 6767 N WICKHAM RD STE 400
City-State-Zip: MELBOURNE FL 32940