2023 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 02/21/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title DIRECTOR Title DIRECTOR ADAMS, JOSHUA Name Name NASSAR, JOAN

Address 1370 SARNO RD. Address 3684 N WICKHAM RD

STE. G STE. B

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

Title **TREASURER** Title **DIRECTOR**

Name BROLINE, ROB Name HOUSTON, SARA

284 ORGANZA PL 1950 VIERA BLVD STE Address Address

STE. 104 CHULUOTA FL 32766-6028

City-State-Zip: City-State-Zip: VIERA FL 32955

Title **SECRETARY**

Title VICE CHAIR KRIETE, JENNIFER Name Name HAGY, DUSTIN

Address 303 1ST AVE Address 3636 AYRSHIRE CIR

City-State-Zip: INDIALANTIC FL 32903 City-State-Zip: MELBOURNE FL 32940

Title **CHAIR** Title MR.

Name AMGOTT, COLLEEN Name SMITH, CHUCK

Address 3630 MALLIE CT Address 93 DELANNOY AVE APT 1101

City-State-Zip: MELBOURNE FL 32934 COCOA FL 32922 City-State-Zip:

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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.

02/21/2023 SIGNATURE: AMY LYON CEO

Electronic Signature of Signing Officer/Director Detail

Date

FILED Feb 21, 2023

Secretary of State

0003704163CC

Date

Officer/Director Detail Continued:

Title MR.

Name DOWNS, KEVIN

Address 8505 S TROPICAL TRL

City-State-Zip: MERRITT ISLAND FL 32952

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 MR.

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