

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002404

Entity Name: BREVARD COUNTY SHERIFF'S OFFICE CHARITY, INC.**Current Principal Place of Business:**440 SOUTH BABCOCK STREET
MELBOURNE, FL 32901**Current Mailing Address:**440 SOUTH BABCOCK STREET
MELBOURNE, FL 32901 US**FEI Number:** 59-3441257**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**NASH, CHARLES IAN ESQ.
NASH & KROMASH, LLP
440 SOUTH BABCOCK STREET
MELBOURNE, FL 32901 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:** CHARLES IAN NASH

04/17/2025

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name GLOVER, SCOTT R
Address 440 SOUTH BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR, TREASURER
Name FRANTZEN, DON
Address 440 SOUTH BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

Title GENERAL COUNSEL
Name NASH, CHARLES I
Address 440 S. BABCOCK ST.
City-State-Zip: MELBOURNE FL 32901

Title SECRETARY, DIRECTOR
Name PEARSON, JEFF
Address 440 SOUTH BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

Title DIRECTOR, VP
Name NEIDERT, TOM
Address 440 SOUTH BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

Title EXECUTIVE DIRECTOR
Name DEATON, LINDSEY
Address 440 SOUTH BABCOCK STREET
City-State-Zip: MELBOURNE FL 32901

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: CHARLES I NASH

GENERAL COUNSEL

04/17/2025

Electronic Signature of Signing Officer/Director Detail

Date