

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 532207

FILED
Apr 23, 2009
Secretary of State

Entity Name: PROFESSIONAL PROPERTIES OF BREVARD, INC.

Current Principal Place of Business:

242 FIFTH AVENUE
INDIALANTIC, FL 32903

New Principal Place of Business:

242 FIFTH AVENUE
INDIALANTIC, FL 32903 US

Current Mailing Address:

P.O. BOX 33307
INDIALANTIC, FL 32903

New Mailing Address:

P.O. BOX 33307
INDIALANTIC, FL 32903 US

FEI Number: 59-1775952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COCHRAN, ROBERT L JR
242 FIFTH AVE
INDIALANTIC, FL 32903 US

Name and Address of New Registered Agent:

COCHRAN, ROBERT L JR
242 FIFTH AVE
INDIALANTIC, FL 32903 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: ROBERT L COCHRAN, JR.

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: COCHRAN, ROBERT L JR
Address: 242 FIFTH AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: ST () Delete
Name: COCHRAN, EVA MAE
Address: 207 RIVERSIDE DR
City-St-Zip: MELBOURNE BEACH, FL

Title: P () Delete
Name: COCHRAN, ROBERT L. SR.
Address: 207 RIVERSIDE DRIVE
City-St-Zip: MELBOURNE BEACH, FL

Title: V (X) Delete
Name: DAVIS, C. DARYL
Address: 428 VERACRUZ BLVD.
City-St-Zip: INDIALANTIC, FL 32903

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: COCHRAN, ROBERT L JR
Address: 242 FIFTH AVE
City-St-Zip: INDIALANTIC, FL 32903

Title: VP (X) Change () Addition
Name: DAVIS, DARYL C
Address: 110 WOOD STORK WAY
City-St-Zip: SEBASTIAN, FL 32958 US

Title: ST (X) Change () Addition
Name: BROOKS, LINDA
Address: 575 COCONUT ST
City-St-Zip: SATELLITE BEACH, FL 32937 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT L COCHRAN, JR.

DP

04/23/2009

Electronic Signature of Signing Officer or Director

Date