

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708161

FILED
Apr 18, 2011
Secretary of State

Entity Name: HOME BUILDERS AND CONTRACTORS ASSOCIATION OF BREVARD, INC.

Current Principal Place of Business:

1500 W. EAU GALLIE BLVD.
STE. A
MELBOURNE, FL 32935

New Principal Place of Business:

1500 W. EAU GALLIE BLVD.
STE. B-2
MELBOURNE, FL 32935

Current Mailing Address:

1500 W. EAU GALLIE BLVD.
STE A
MELBOURNE, FL 32935 US

New Mailing Address:

1500 W. EAU GALLIE BLVD.
STE B-2
MELBOURNE, FL 32935 US

FEI Number: 59-1448721

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KAISER, FRANCK H
1500 W. EAU GALLIE BLVD.
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: KAISER, FRANCK H
Address: 1500 W. EAU GALLIE BLVD., SUITE B-2
City-St-Zip: MELBOURNE, FL 32935

Title: PD
Name: FOLEY, DAVID
Address: 1500 W EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935

Title: TD
Name: GOLDBLATT, JOE
Address: 1500 W EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935

Title: SD
Name: EGGERS, GARY
Address: 1500 W EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935

Title: VD
Name: CARTAGENA, NATASHA
Address: 1500 W EAU GALLIE BLVD
City-St-Zip: MELBOURNE, FL 32935

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: FRANCK KAISER

CEO

04/18/2011

Electronic Signature of Signing Officer or Director

Date