

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 710093

FILED  
Apr 13, 2005  
Secretary of State

Entity Name: THE ARC OF BREVARD, INC.

## Current Principal Place of Business:

1694 CEDAR STREET  
ROCKLEDGE, FL 32955

## New Principal Place of Business:

## Current Mailing Address:

1694 CEDAR STREET  
ROCKLEDGE, FL 32955

## New Mailing Address:

FEI Number: 59-0905505

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DRESSLER, JAMES R.  
110 DIXIE LANE  
COCOA BEACH, FL 32931 US

## Name and Address of New Registered Agent:

HUDSON, LYNN  
3804 LA FLOR DRIVE  
ROCKLEDGE, FL 32955 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: LYNN HUDSON

04/13/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: NUTTING, CHARLES  
Address: 719 E HIBISCUS BLVD  
City-St-Zip: MELBOURNE, FL 32901

Title: D ( ) Delete  
Name: SCHWEINSBERG, JOHN  
Address: 1694 CEDAR ST.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: D ( ) Delete  
Name: MARQUEZ, ADRIAN  
Address: 100 SYKES CREEK PKWY  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: C ( ) Delete  
Name: DROPSKI, CYNDI  
Address: 680 W. EAU GALLIE BLVD.  
City-St-Zip: MELBOURNE, FL 32935

Title: VCD ( ) Delete  
Name: HAMENT, ANDY  
Address: P.O. BOX 1840  
City-St-Zip: MELBOURNE, FL 329021870

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: PRINGLE, J R  
Address: 1182 POTOMAC DRIVE  
City-St-Zip: MERRITT ISLAND, FL 32952

Title: S (X) Change ( ) Addition  
Name: COLLINS, SUSAN  
Address: 152 WINDWARD WAY  
City-St-Zip: INDIAN HARBOUR BEACH, FL 32937

Title: D (X) Change ( ) Addition  
Name: COLUMBO, JOSEPH  
Address: 2351 W. EAU GALLIE BLVD.  
City-St-Zip: MELBOURNE, FL 32935

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

Title: VCD (X) Change ( ) Addition  
Name: HAMENT, ANDY  
Address: P.O. BOX 1870  
City-St-Zip: MELBOURNE, FL 329021870

Title: D ( ) Change (X) Addition  
Name: MYERS, JIM  
Address: 750 N. ATLANTIC BLVD. , SUITE 604  
City-St-Zip: COCOA BEACH, FL 32931

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LYNN HUDSON

VP/C

04/13/2005

Electronic Signature of Signing Officer or Director

Date