2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#714584

FILED Jan 15, 2009 Secretary of State

Entity Name: BREVARD CHRISTIAN SCHOOLS, INC.

Current Principal Place of Business: New Principal Place of Business:

1100 WEST DORCHESTER AVE. MELBOURNE, FL 32904

Current Mailing Address: New Mailing Address:

1100 WEST DORCHESTER AVE. MELBOURNE, FL 32904

FEI Number: 59-1232995 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HEDMAN, G.W.

877 N A1A HWY

976 TAVERNIER CIRCLE NE
#1106

PALM BAY, FL 32905 US

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: MICHAEL D. BRANCH 01/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: FS (X) Change () Addition Name: BRANCH, MICHAEL Name: DUNN, CHRISTI M

 Address:
 976 TAVÉRNIER CIRCLE NE
 Address:
 505 S. MIRAMAR AVE #2201

 City-St-Zip:
 PALM BAY, FL 32905
 City-St-Zip:
 INDIALANTIC, FL 32903

Title: SD () Delete Title: () Change () Addition

 Name:
 WEBB, ADA Y.,
 Name:

 Address:
 619 W. ESPANOLA WAY
 Address:

 City-St-Zip:
 MELBOURNE FL,
 City-St-Zip:

Title: VPD () Delete Title: () Change () Addition

 Name:
 WEBB, WILLIAM
 Name:

 Address:
 619 W ESPANOLA WAY
 Address:

 City-St-Zip:
 MELBOURNE, FL
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 SCHRUM, CHARLES
 Name:

 Address:
 276 SYLVIA RD
 Address:

 City-St-Zip:
 W MELBOURNE, FL 32904
 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTI DUNN FS 01/15/2009