## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT#717131** 

City-St-Zip:

ROCKLEDGE, FL 32955

FILED Apr 21, 2009 Secretary of State

Entity Name: THE BREVARD MUSEUM, INC.					
Current Pr	incipal Place of Business:	New Princ	New Principal Place of Business:		
2201 MICH COCOA, FI					
Current Ma	ailing Address:	New Maili	New Mailing Address:		
2201 MICH COCOA, F					
FEI Number: 23-7112336 FEI Number Applied For ( ) F		FEI Number Not Appl	Number Not Applicable ( ) Certificate of Status Desired (X)		
Name and Address of Current Registered Agent: Na			ame and Address of New Registered Agent:		
BROWN, M 2201 MICH COCOA, FI	IGAN AVE				
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.					
SIGNATUR	RE:				
	Electronic Signature of Registered Agent		Date		
OFFICERS	AND DIRECTORS:	ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	S () Delete THOMPSON-SONG, DENISE 200 S BANANA RIVER BLVD #504 COCOA BEACH, FL 32931	Title: Name: Address: City-St-Zip:	S (X RADER, EMM 2816 KENYAN COCOA, FL 3	I AVENUE	
Title: Name: Address: City-St-Zip:	P ( ) Delete SLEY, MARK 1185 OLD PARSONAGE DR MERRITT ISLAND, FL 32952	Title: Name: Address: City-St-Zip:	(	) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP ( ) Delete ELLIS, CAROL 1823 CRANE CREEK RD MELBOURNE, FL 32920	Title: Name: Address: City-St-Zip:	VP (X BROWN, KRIS 1905 24TH AV BRADENTON,	'ENUE WEST	
Title: Name: Address: City-St-Zip:	TT () Delete CONTI, TOM 415 ROCKLEDGE DR ROCKLEDGE, FL 32955	Title: Name: Address: City-St-Zip:	TT (XYON, TERRY 115 DUNE LAI COCOA, FL 3		
Title: Name: Address:	D ( ) Delete BROWN, MARYKIM 2909 SHEPARD DR	Title: Name: Address:	(	) Change ( ) Addition	

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.

City-St-Zip:

SIGNATURE: MARYKIM BROWN 04/21/2009 D