## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT#719142**

FILED Apr 17, 2009 Secretary of State

Entity Name: THE DEBUTANTE SOCIETY OF CENTRAL BREVARD, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	INDO CIRCLE RNE, FL 32940			
urrent M	lailing Address	::	New Mailing Addres	s:
	INDO CIRCLE RNE, FL 32940			
El Number	: 41-1123321	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
lame and	d Address of Cເ	ırrent Registered Agent:	Name and Address of	of New Registered Agent:
102 GAL	, JULIE O INDO CIRCLE RNE, FL 32940	US		
	e named entity su e of Florida.	ubmits this statement for the p	purpose of changing its registere	d office or registered agent, or both,
the Stat	e of Florida.	ubmits this statement for the	purpose of changing its registere	d office or registered agent, or both,
the Stat	e of Florida. É RE:	ubmits this statement for the positions of the positions of Registered Ag		d office or registered agent, or both,  Date
n the Stat	e of Florida. É RE:	c Signature of Registered Ag	ent	
the Stat	e of Florida.  RE: Electronic  S AND DIRECT	c Signature of Registered Ag  ORS:  Delete  A DRIVE	ent	Date
n the Stati SIGNATU DFFICER itle: ame: ddress:	e of Florida.  RE:  Electronic  S AND DIRECT  P () [ DAVIS, DEBBIE 860 CARAMBOL MERRITT ISLANI	C Signature of Registered Ag  ORS:  Delete  A DRIVE D, FL 32952  Delete  AN  (ER DRIVE	ent  ADDITIONS/CHANG  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR
n the State  CIGNATU  DFFICER  itle: aame: ddress: ity-St-Zip: itle: aame: ddress:	e of Florida.  RE: Electronic  S AND DIRECT  P () DAVIS, DEBBIE 860 CARAMBOLA MERRITT ISLANI  V () DBRODNAN, SUSA 1531 INDIAN RIV COCOA, FL 329	C Signature of Registered Ag ORS: Delete A DRIVE D, FL 32952 Delete AN (FR DRIVE 22 Delete IE N OAKES DRIVE	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  ES TO OFFICERS AND DIRECTOR  ( ) 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.

SIGNATURE: JULIE ROBBINS T 04/17/2009