2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2005
Secretary of State

DOCUMENT# 719278

Entity Name: BREVARD COUNTY LEGAL AID, INC.

Current Principal Place of Business:

1017 S FLORIDA AVE
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

1017 S FLORIDA AVE
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 59-1301750 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, ROBERT L JR.
1017 S FLORIDA AVE
ROCKLEDGE, FL 32955 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:	TD	( ) Delete
Name:	LAWLEY, MICHAEL S	
Address:	1735 WEST HIBISCUS BLVD., SUITE 200	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	PD	( ) Delete
Name:	MOMMERS, PIERRE	
Address:	2351 W. EAU GALLIE BOULEVARD, UNIT 1	
City-St-Zip:	MELBOURNE, FL 32935	
Title:	D	( ) Delete
Name:	WILDMAN, DAVID L.	
Address:	25 W. NEW HAVEN AVE.	
City-St-Zip:	MELBOURNE, FL 32901	
Title:	D	( ) Delete
Name:	JERRY L JESTER,	
Address:	775 E MERRITT ISLAND CSWAY #320	
City-St-Zip:	MERRITT ISLAND, FL 32954	
Title:	M	( ) Delete
Name:	JOHNSON, ROBERT L JR.	
Address:	1017 S. FLORIDA AVENUE	
City-St-Zip:	ROCKLEDGE, FL 32955	
Title:	VP	( ) Delete
Name:	TELLES, JANIS R	
Address:	962 TAMARIND CIRCLE	
City-St-Zip:	ROCKLEDGE, FL 32955	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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: ROBERT L. JOHNSON, JR. M 04/26/2005

Electronic Signature of Signing Officer or Director — Date