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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 14 PM 2:27

DOCUMENT # 732258 (9)

1. Corporation Name
BIG BROTHERS & BIG SISTERS OF BREVARD COUNTY, IN C.

Principal Place of Business Mailing Address
1600 SARNO RD STE 24 MELBOURNE FL 32935 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 03/25/1975	3a. Date of Last Report 03/15/1994
4. FEI Number 59-6555007	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input checked="" type="checkbox"/>	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip Country	28 Zip Country
24	29
25	30

9. Name and Address of Current Registered Agent
**BAILEY, SANDRA D
252 HAYES AVE
COCOA BCH FL 32931**

10. Name and Address of New Registered Agent
81 Name **Romine, James A.**
82 Street Address (P.O. Box Number is Not Acceptable)
1030 Bluegrass Lane
83
84 City **Rockledge** FL 85 Zip Code **32955**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: James A. Romine James A. Romine, President 01-26-95
(NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV FORD, HARRY 909 OSPREY DR MELBOURNE FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT KISTLER, CRAIG 185 DRISKELL STREET PALM BAY FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS HORNE, ROBERTA 3 COVE RD MELBOURNE BCH FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV JAMES JANNETTE 22 COUNTRY CLUB BLVD. COCOA BEACH FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SANDRA BAILEY 252 HAYES AVENUE COCOA BEACH FL
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	DT Sally A. Robertson 311 N. Laila Drive West Melbourne, FL 32904 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	DS Sharon A. Foster 1737 Shoreview Drive Indianapolis, FL 32903 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	DV David L. Rosell 514 Carriage Road Indian Harbour Beach, FL 32937 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	DP James A. Romine 1030 Bluegrass Lane Rockledge, FL 32955 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath in Block 12 or Block 13 if checked, or as an attachment with an address.

SIGNATURE: James A. Romine James A. Romine, President (407)259-7874
SIGNATURE AND TYPED OR PRINTED NAME OF HIGHING OFFICER OR DIRECTOR