

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755674

FILED
Mar 21, 2005
Secretary of State

Entity Name: PREVENT! OF BREVARD, INC.

Current Principal Place of Business:

1948 PINEAPPLE AVE.
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

1948 PINEAPPLE AVE.
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-2097519

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HEIMMER, KAY
1235 LESLIE DR.
MERRITT ISLAND, FL 32952 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: CD () Delete
Name: JONES-FRANCEY, DARCIA
Address: 1150 RIVERMONT DR
City-St-Zip: MELBOURNE, FL 32935

Title: VC () Delete
Name: MCINTYRE, LARRY
Address: 1829 PLANTATION CIRCLE SE
City-St-Zip: PALM BAY, FL 32909

Title: SD () Delete
Name: VALLETUTTI, RENEE
Address: 140 CRISPIN ST.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: T () Delete
Name: VANGORP, JOHN
Address: 441 HEATHROW CIRCLE
City-St-Zip: ROCKLEDGE, FL 32955

Title: P () Delete
Name: HEIMMER, KAY,
Address: 1235 LESLIE DR.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: D () Delete
Name: PERERS, SUSAN F
Address: 5985 S. TROPICA TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952

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: T (X) Change () Addition
Name: WEIBERT, JIM
Address: 847 WOODBINE DRIVE
City-St-Zip: MERRITT ISLAND, FL 32952

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: JIM MULLANEY

CFO

03/21/2005

Electronic Signature of Signing Officer or Director

Date