## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 755674** 

FILED Jun 02, 2008 Secretary of State

Entity Name: PREVENT! OF BREVARD, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1948 PINEAPPLE AVE. MELBOURNE, FL 32935 **Current Mailing Address: New Mailing Address:** 1948 PINEAPPLE AVE MELBOURNE, FL 32935 FEI Number: 59-2097519 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HEIMMER, KAY 1235 LESLIE DR. MERRITT ISLAND, FL 32952 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition MCINTYRE, LARRY NICKLE, MARY Name: Name: 2890 HARPER ROAD Address: 1300 S BABCOCK ST Address: City-St-Zip: MELBOURNE, FL 32904 City-St-Zip: MELBOURNE, FL 32901 Title: VC () Delete Title: (X) Change ( ) Addition VALLETTUTI, RENEE NICKLE, MARY Name: Name: Address: 6000 BABCOCK ST SE Address: 5040 VALLE COLLINA LANE City-St-Zip: PALM BAY, FL 32909 City-St-Zip: MERRITT ISLAND, FL 32952 Title: () Delete Title: SD (X) Change ( ) Addition VAN GORP, JOHN GENONI, RUTHANN Name: Name: 110 LONGWOOD AVE-MAIL STO[ 106 758 GLENGARRY DRIVE Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: MELBOURNE, FL 32940 Title: () Delete Title: (X) Change ( ) Addition WEIBERT, JIM Name: Name: ERICSON, SUE 847 WOODBINE DRIVE 3935 HIDDEN OAKS LANE Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: MELBOURNE, FL 32934 Title: () Delete Title: () Change () Addition HEIMMER, KAY, Name: Name: 1235 LESLIE DR. Address: Address: City-St-Zip: MERRITT ISLAND, FL 32952 City-St-Zip: Title: () Delete Title: () Change () Addition JONES-FRANCEY, DARCIA Name: Name: Address: PO BOX 360843 Address: MELBOURNE, FL 32936 08 City-St-Zip: City-St-Zip:

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: KAY HEIMMER PRES 06/02/2008