APPROVED AND FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 763871

1. Entity Name
BREAKER'S WEST OF BREVARD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2050 ATLANTIC AVE. # 311 MELBOURNE BEACH, FL 32951	2050 ATLANTIC AVE. MELBOURNE BEACH, FL 32951

03122007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2266305 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CLAYTON & MCCULLOH 1065 MAITLAND CENTER COMMERES BLVD MAITLAND, FL 32751	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
(Signature, title or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fee

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Secretary CRUDO, WILLIAM 2050 ATLANTIC ST #314 MELBOURNE BEACH, FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SECRETARY	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T President SAVAGE, WILLIAM 1850 ATLANTIC ST #124 MELBOURNE BCH, FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRESIDENT	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Treasurer BOBBY, WALTER 1950 ATLANTIC ST MELBOURNE BEACH, FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER	☒ Change ☐ Addition
TITLE B, M / NAME / STREET ADDRESS / CITY-ST-ZIP	Bernard Mangeng 1850 ATLANTIC ST # 113 MELBOURNE BEACH FL 32951	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	BERNARD MANGENG 1850 ATLANTIC ST #113 MELBOURNE BEACH, FL 32951	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DON	☐ Delete	TITLE B, M / NAME / STREET ADDRESS / CITY-ST-ZIP	DONALD RUFFING 2150 ATLANTIC ST # 412 MELBOURNE BEACH, FL 32951	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE B, M / NAME / STREET ADDRESS / CITY-ST-ZIP	PETER LAND 2150 ATLANTIC ST # 411 MELBOURNE BEACH, FL 32951	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 03/12/07
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) (Date) (Daytime Phone #)

Document corrected per Bill Savage, President. PSL