2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#766932

FILED Apr 07, 2008 Secretary of State

Entity Name: BREVARD RARE FRUIT COUNCIL, INC.

Current Principal Place of Business: New Principal Place of Business:

MELBOURNE FRONT STREET CIVIC CENTER

FRONT STREET

MELBOURNE, FL 32901 US

Current Mailing Address: New Mailing Address:

P.O. BOX 033773

INDIALANTIC, FL 32903 US

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIDSOHN, WILLA 1643 OLD COLONIAL WAY MELBOURNE, FL 32935 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:

Flateria Constant of Desirtant Asset

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD () Delete Title: VPD (X) Change () Addition Name: LULOFS, LARRY Name: KORPACZ, STEVE Address: 826 HUNTINGTON ST NE Address: 8170 WINDOVER WAY

City-St-Zip: PALM BAY, FL 32907 City-St-Zip: TITUSVILLE, FL 32780

Title: PD () Delete Title: PD (X) Change () Addition Name: MILLER, RICHARD Name: FLETCHER, JAMES

 Address:
 4725 SÁNO POINT RD
 Address:
 530 EAST CRISAFULLI ROAD

 City-St-Zip:
 GRANT, FL 32949
 City-St-Zip:
 MERRITT ISLAND, FL 32953

Title: TD () Delete Title: TREA (X) Change () Addition Name: GARG. GOPAL Name: NICHOLSON, JOSHUA

 Name:
 GARG, GOPAL
 Name:
 NICHOLSON, JOSHUA

 Address:
 509 VELAS CT
 Address:
 841 SPAINISH CAY DRIVE

 City-St-Zip:
 INDIALANTIC, FL 32903
 City-St-Zip:
 MERRITT ISLAND, FL 32952

Title: () Delete Title: ATRE () Change (X) Addition

 Name:
 Name:
 GONZALEZ, GAIL

 Address:
 Address:
 1 SWEET STREET

 City-St-Zip:
 City-St-Zip:
 ROCKLEDGE, FL 32955

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: JAMES FLETCHER PD 04/07/2008