2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767143

FILED Apr 28, 2008 Secretary of State

Entity Name: CHRISTIAN SCHOOL OF BREVARD, INCORPORATED **Current Principal Place of Business: New Principal Place of Business:** CENTRAL CHURCH OF CHRIST 2010 N. U.S. #1 COCOA, FL 32922 **Current Mailing Address: New Mailing Address:** CENTRAL CHURCH OF CHRIST CENTRAL CHURCH OF CHRIST 2010 N. U.S. #1 P.O. BOX 236065 COCOA, FL 329236065 COCOA, FL 32922 US FEI Number: 59-2293184 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: WALTON, BRIAN R TILLOTSON, TIM R 195 SONYA DR 3013 DUNHILL COCOA, FL 32926 US COCOA, FL 32926 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: TIM TILLOTSON 04/28/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete DIAZ, JAVIER Name: Name: 93 DELANNOY AVE. #302 Address: Address: City-St-Zip: COCOA, FL 32922 US City-St-Zip: Title: SD () Delete Title: () Change () Addition Name: WALKER, CECIL Name: Address: 4601 SOUTH FRIDAY CIRCLE Address: City-St-Zip: COCOA, FL 32926 US City-St-Zip: Title: () Delete Title: () Change () Addition PETER, CURTIS Name: Name: 919 LEVITT PARKWAY Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 US City-St-Zip: Title: VD (X) Delete Title: () Change () Addition Name: OLIVER, RAYMOND C Name: Address: 500 BELLA CAPRI DRIVE Address: City-St-Zip: MERRITT ISLAND, FL 32952 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: TIM TILLOTSON FD 04/28/2008