

# 2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F08000002285

**FILED**  
**Oct 13, 2009**  
**Secretary of State**

**Entity Name:** SOUTH BREVARD RAMS INC.

**Current Principal Place of Business:**

4648 CHASTAIN DR.  
MELBOURNE, FL 32940

**New Principal Place of Business:**

659 DWIGHT AVE. SE  
PALM BAY, FL 32909

**Current Mailing Address:**

4648 CHASTAIN DR.  
MELBOURNE, FL 32940

**New Mailing Address:**

659 DWIGHT AVE. SE  
PALM BAY, FL 32909

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **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:**

AWOBUSUYI, AYOKUNLE  
4648 CHASTAIN DR.  
MELBOURNE, FL 32940      US

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

BYRD, MELVIN  
659 DWIGHT AVE. SE  
PALM BAY, FL 32909      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: DAVID DYE

10/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP                      ( ) Delete  
Name: AWOBUSUYI, AYOKUNLE  
Address: 4648 CHASTAIN DR.  
City-St-Zip: MELBOURNE, FL 32940

Title: DVP                      ( ) Delete  
Name: THOMPSON, CHRISTOPHER  
Address: 4195 FENROSE CIR.  
City-St-Zip: MELBOURNE, FL 32940

Title: S                      (X) Delete  
Name: THOMPSON, GLENN  
Address: 4195 FENROSE CIR.  
City-St-Zip: MELBOURNE, FL 32940

Title: T                      (X) Delete  
Name: AWOBUSUYI, ADE  
Address: 4648 CHASTAIN DR.  
City-St-Zip: MELBOURNE, FL 32940

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DVP                      (X) Change ( ) Addition  
Name: BYRD, MELVIN  
Address: 659 DWIGHT AVE. SE  
City-St-Zip: PALM BAY, FL 32909

Title: DP                      (X) Change ( ) Addition  
Name: DYE, DAVID  
Address: 1461 HEALEY STREET NW  
City-St-Zip: PALM BAY, FL 32909

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 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: MELVIN BYRD

DVP

10/13/2009

Electronic Signature of Signing Officer or Director

Date