

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F69063

FILED
Feb 17, 2011
Secretary of State

Entity Name: DATA MANAGEMENT ASSOCIATES OF BREVARD, INC.

Current Principal Place of Business:

3225 JORDAN BLVD.
MALABAR, FL 32950 US

New Principal Place of Business:

Current Mailing Address:

3225 JORDAN BLVD.
MALABAR, FL 32950 US

New Mailing Address:

FEI Number: 59-2157453 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

GOETSCH, PAUL W
831 UNIVERSE STREET NW
PALM BAY, FL 32907 US

Name and Address of New Registered Agent:

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:

Title: PD
Name: LARSON, D JEROME
Address: 3225 JORDAN BLVD.
City-St-Zip: MALABAR, FL 32950 US

Title: S
Name: ORR, DEBORAH A.
Address: 573 IXORA DRIVE
City-St-Zip: MELBOURNE, FL 32935 US

Title: T
Name: LANZA, SANDRA D.
Address: 3980 MILLER LANE
City-St-Zip: MALABAR, FL 32950 US

Title: D
Name: BLACK, DONALD G
Address: 1196 INDRIIO LANE NE
City-St-Zip: PALM BAY, FL 32905 US

Title: D
Name: BECKETT, TRACY L.
Address: 732 CLEVELAND ST. #13
City-St-Zip: SEBASTIAN, FL 32958 US

Title: D
Name: EVERETTE, MICHAEL D.
Address: 2205 ARNOLD LANE
City-St-Zip: MALABAR, FL 32950 US

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: D JEROME LARSON

PD

02/17/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date