2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002418

Entity Name: BREVARD COUNTY TRIAD, INC.

FILED Mar 23, 2006 Secretary of State

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

P.O. BOX 8264 P.O. BOX 8264

COCOA, FL 329248264 COCOA, FL 329248264 US

Current Mailing Address: New Mailing Address:

P.O. BOX 8264 P.O. BOX 8264

COCOA, FL 329248264 COCOA, FL 329248264 US

FEI Number: 59-3624703 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:

TRACI, FRANCIS

881 EVERGREEN PLACE
ROCKLEDGE, FL 32955 US

TRACI, FRANCIS
3585 GLORIA AVE
MIMS, FL 32754 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: 03/23/2006

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: DP () Delete Title: DP (X) Change () Addition

 Name:
 FRANCIS, TRACI
 Name:
 FRANCIS, TRACI

 Address:
 881 EVERGREEN PLACE
 Address:
 3585 GLORIA AVE

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 MIMS, FL 32754 US

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

 Name:
 MCCARTER, JANIS

 Name:
 MCCARTER, JANIS

Address: 1549 CLOVER CIR Address: 1549 CLOVER CIR
City-St-Zip: MELBOURNE, FL 32935 City-St-Zip: MELBOURNE, FL 32935 US

Title: 2VP () Delete Title: 2VP (X) Change () Addition Name: HAYES, NORMAN C Name: HAYES, NORMAN C

Address: 103 ANONA PL Address: 103 ANONA PL

City-St-Zip: INDIAN HABOR BEACH, FL 32937 City-St-Zip: INDIAN HABOR BEACH, FL 32937 US

Title: T () Delete Title: T (X) Change () Addition
Name: SANDY, WILLIAMS Name: SANDY, WILLIAMS

 Address:
 PO BOX 565002
 Address:
 PO BOX 565002

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

ity-3t-zip. ROCKLEDGE, FL 32933 U

Title: PIO () Delete Title: PIO (X) Change () Addition Name: BLUE-GAINES, JILL Name: BLUE-GAINES, JILL

Address: 3139 WATERWAY PL Address: 133 PERFECT DR
City-St-Zip: DAYTONA BEACH, FL 32128 City-St-Zip: DAYTONA BEACH, FL 32128 US

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

 Name:
 MASIELLO, MARTHA
 Name:
 MASIELLO, MARTHA

 Address:
 206 S. BREVARD AVE.
 Address:
 206 S. BREVARD AVE.

 City-St-Zip:
 COCOA BEACH, FL 32931
 City-St-Zip:
 COCOA BEACH, FL 32931 US

I hereby certify that the information supplied with this filing does not qualify for the 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: JANIS MCCARTER DVP 03/23/2006

Electronic Signature of Signing Officer or Director

Date