

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002418

FILED
Jan 16, 2012
Secretary of State

Entity Name: BREVARD COUNTY TRIAD, INC.

Current Principal Place of Business:

777 E. MERRITT ISLAND CSWY.
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 410518
MELBOURNE, FL 329410518 US

New Mailing Address:

FEI Number: 59-3624703

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALTERS, ANDREW M
700 PARK AVE
TITUSVILLE, FL 32780 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: VP
Name: DAVIS, DEBBI M
Address: 2725 JUDGE FRAN JAMIESON WAY, BLD D
City-St-Zip: VIERA, FL 32940 US

Title: P
Name: WALTERS, ANDREW M
Address: 700 PARK AVENUE
City-St-Zip: TITUSVILLE, FL 32780 US

Title: S
Name: CONNER, PAMELA D
Address: 2575 NORTH COURTENAY PARKWAY
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: T
Name: MEAGHER, CAROLYN J
Address: 3828 ST. ARMENS CIRCLE
City-St-Zip: MELBOURNE, FL 32934 US

Title: MGRM
Name: GOODWIN, TERRI
Address: P.O. BOX 465
City-St-Zip: SCOTTSMOOR, FL 32775 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CAROLYN J. MEAGHER

T

01/16/2012

Electronic Signature of Signing Officer or Director

Date