

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000000227

FILED  
May 06, 2010  
Secretary of State

**Entity Name:** MOPARS OF BREVARD, INC.

**Current Principal Place of Business:**

191 SAND PINE RD  
INDIALANTIC, FL 32903

**New Principal Place of Business:**

1059 HIBISCUS ST.  
PORT ST. JOHN, FL 32927

**Current Mailing Address:**

P.O.BOX 410003  
MELBOURNE, FL 32941

**New Mailing Address:**

**FEI Number:** 65-1113041      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **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:**

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

WARNER, JON S  
1059 HIBISCUS ST  
PORT ST JOHN, FL 32927      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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: WARNER, JON  
Address: 1059 HIBISCUS ST  
City-St-Zip: PORT ST. JOHN, FL 32927

Title: VD  
Name: ANDERSON, PENNY  
Address: 1002 GLENHAM DR, NE  
City-St-Zip: PALM BAY, FL 32905

Title: TD  
Name: KRIZAN, RICHARD  
Address: 16 JUDY CT  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: SD  
Name: YLIJOKI, CHUCK  
Address: 4513 LONG LAKE RD  
City-St-Zip: MELBOURNE, FL 32934

Title: D  
Name: SHAFFER, GERRY  
Address: 656 FLEET ST  
City-St-Zip: MELBOURNE, FL 32901

Title: D  
Name: MOYER, RAY  
Address: 473 NINA RD, NE  
City-St-Zip: PALM BAY, FL 32907

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: JON S. WARNER

PD

05/06/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date