

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004802

FILED  
Apr 29, 2007  
Secretary of State

**Entity Name:** BREVARD YOUTH EDUCATION BROADCASTING CORPORATION

**Current Principal Place of Business:**

325 VALENCIA ROAD  
WEST MELBOURNE, FL 32904

**New Principal Place of Business:**

6050 BABCOCK STREET SE -  
21  
PALM BAY, FL 32909

**Current Mailing Address:**

325 VALENCIA RD  
WEST MELBOURNE, FL 32904

**New Mailing Address:**

**FEI Number:** 36-4500316      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

BENNETT, RANDY  
325 VALENCIA ROAD  
MELBOUNRE, FL 32904      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: D      ( ) Delete  
Name: SAMPSON, CARL  
Address: 325 VALENCIA ROAD  
City-St-Zip: MELBOUNRE, FL 32904

Title: D      ( ) Delete  
Name: KILE, STACEY  
Address: 325 VALENCIA ROAD  
City-St-Zip: MELBOURNE, FL 32904

Title: D      ( ) Delete  
Name: BENNETT, CLIFF  
Address: 325 VALENCIA RD  
City-St-Zip: MELBOURNE, FL 32904

Title: D      ( ) Delete  
Name: DAVID, MICHAEL  
Address: 325 VALENCIA ROAD  
City-St-Zip: MELBOUNRE, FL 32904

Title: D      ( ) Delete  
Name: O'CONNOR, TIM  
Address: 325 VALENCIA ROAD  
City-St-Zip: MELBOURNE, FL 32904

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

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CB

D

04/29/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date