

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 08, 2010
Secretary of State

Entity Name: BREVARD HUMANITY CENTER, INC.

Current Principal Place of Business:

870 AUSTRALIAN ST
MERRITT ISLAND, FL 32953

New Principal Place of Business:

870 AUSTRALIAN ST
MERRITT ISLAND, FL 32953 US

Current Mailing Address:

870 AUSTRALIAN ST
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 04-3650533

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MCCLANAHAN, LELAND
870 AUSTRALIAN ST
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

MCCLANAHAN, LELAND DR.
870 AUSTRALIAN ST
MERRITT ISLAND, FL 32953 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: DR. LELAND MCCLANAHAN

01/08/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PCED
Name: MCCLANAHAN, DR. LELAND
Address: 870 AUSTRALIAN ST.
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: VPD
Name: MCCLANAHAN, DR. LAVAUGHN
Address: 870 AUSTRALIAN ST
City-St-Zip: MERRITT ISLAND, FL 32953

Title: TD
Name: MCCLANAHAN, LOREN
Address: 1108 WOODSMERE PKWY.
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD
Name: RAINEY, DR. JUDITH
Address: 1038 W. 18TH STREET
City-St-Zip: ORLANDO, FL 32805

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: DR. LELAND MCCLANAHAN

PCED

01/08/2010

Electronic Signature of Signing Officer or Director

Date