

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000002546

FILED  
Jul 21, 2008  
Secretary of State

**Entity Name:** BREVARD HEART FOUNDATION, INC.

**Current Principal Place of Business:**

307 E. NEW HAVEN AVE., STE. 1  
MELBOURNE, FL 32901

**New Principal Place of Business:**

8035 SPYGLASS HILL RD.  
MELBOURNE, FL 32940

**Current Mailing Address:**

307 E. NEW HAVEN AVE., STE. 1  
MELBOURNE, FL 32901

**New Mailing Address:**

P.O. BOX 2151  
MELBOURNE, FL 32901

**FEI Number:** 59-6150538      **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:**

HOPKINS, JOHN R  
307 E. NEW HAVEN AVE., STE. 1  
MELBOURNE, FL 32901    US

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

HOPKINS, JOHN R  
8035 SPYGLASS HILL RD.  
MELBOURNE, FL 32940    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:

07/21/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: V      ( ) Delete  
Name: HOPKINS, JOHN R  
Address: 307 E. NEW HAVEN  
City-St-Zip: MELBOURNE, FL 32902

Title: S      ( ) Delete  
Name: MCKENNA, DON  
Address: 3795 RAMBLEWOOD CT  
City-St-Zip: MELBOURNE, FL 32934

Title: D      ( ) Delete  
Name: HARRIS, WILLIAM  
Address: 325 5TH AVE,  
City-St-Zip: INDIALANTIC, FL 32903

Title: P      ( ) Delete  
Name: BOONE, C. HAMILTON  
Address: 301 HIBISCUS BLVD.  
City-St-Zip: MELBOURNE, FL 32901

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

Title: V      (X) Change ( ) Addition  
Name: HOPKINS, JOHN R  
Address: 8035 SPYGLASS HILL RD.  
City-St-Zip: MELBOURNE, FL 32940

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: JOHN R HOPKINS

V

07/21/2008

Electronic Signature of Signing Officer or Director

Date