2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# N02000007509

Entity Name: BREVARD YOUTH THEATRE AND ACADEMY, INC.

Current Principal Place of Business:

4767 BLACKBERRY DRIVE
MELBOURNE, FL 32904

New Principal Place of Business:

Current Mailing Address:

4767 BLACKBERRY DRIVE
MELBOURNE, FL 32904

New Mailing Address:

FEI Number: 03-0487568 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

O'BRIEN, JAMES
1686 WEST HIBISCUS BOULEVARD
MELBOURNE, FL 32901 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:	VD	( ) Delete
Name:	EVANS, ELOISE MS.	
Address:	4767 BLACKBERRY DRIVE	
City-St-Zip:	MELBOURNE, FL 32904	
Title:	PD	( ) Delete
Name:	GOULDING, RICHARD E DR.	
Address:	639 ALAMANDA COURT	
City-St-Zip:	INDIALANTIC, FL 32903	
Title:	D	( ) Delete
Name:	MELLEN, MICHAEL	
Address:	902 HAAS AVENUE NE	
City-St-Zip:	PALM BAY, FL 32907	
Title:	SD	( ) Delete
Name:	PEPIN, CHRISTINE MS.	
Address:	412 RIVERVIEW LANE	
City-St-Zip:	MELBOURNE BEACH, FL 32951	
Title:	TD	( ) Delete
Name:	GRAMMENOS, BETSY MS.	
Address:	17 PINEHILL DRIVE	
City-St-Zip:	INDIALANTIC, FL 32903	
Title:	D	( ) Delete
Name:	LAZAZZERA, ANGELA MS.	
Address:	520 HAWKSBILL ISLAND DRIVE	
City-St-Zip:	SATELLITE BEACH, FL 32937	

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRISTINE PEPIN SD 04/29/2004

Electronic Signature of Signing Officer or Director — Date