

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007509

FILED  
Apr 29, 2006  
Secretary of State

**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: LAZZAZZERA, 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:

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTINE PEPIN

SD

04/29/2006

Electronic Signature of Signing Officer or Director

Date