2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002379

Entity Name: THE BREVARD BAR FOUNDATION, INC.

FILED Jan 04, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

7331 OFFICE PARK PLACE SUITE 300

MELBOURNE, FL 32940

New Mailing Address: Current Mailing Address:

7331 OFFICE PARK PLACE SUITE 300 MELBOURNE, FL 32940 US

FEI Number: 45-0520540 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

CHARPENTIER, STEPHEN G 2285 WEST EAÚ GALLIE BOULEVARD MELBOURNE, FL 32935

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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete HARRELL, CLARRISSA HARRELL, CLARISSA Name: Name:

33 SUNTREE PLACE SUITE D Address: 7331 OFFICE PARK PLACE, SUITE 300 Address:

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

Title: () Delete Title: (X) Change () Addition

Name: CACCOATORE, SAMMY M Name: KAHN, MICHAEL

Address: 7331 OFFICE PARK PLACE SUITE 300 Address: 7331 OFFICE PARK PLACE SUITE 300

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

Title: () Delete Title: SEC (X) Change () Addition

HARRELL, CLARISSA E Name: GIGLIOTTI, CARMINE Name:

33 SUNTREE PLACE, STE D 7331 OFFICE PARK PLACE, SUITE 300 Address: Address:

City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940

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: JILL P. LILES **EXEC** 01/04/2008