2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007754

Apr 25, 2012 Secretary of State

Entity Name: BREVARD ASSOCIATION OF HUMAN SERVICES, INC.

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

427 5TH AVENUE 3962 WEST EAU GALLIE BOULEVARD INDIALANTIC, FL 32903

SUITE A

MELBOURNE, FL 32934

Current Mailing Address: New Mailing Address:

427 5TH AVENUE 3962 WEST EAU GALLIE BOULEVARD INDIALANTIC, FL 32903

SUITE A

MELBOURNE, FL 32934

FEI Number: 20-1540381 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

DENAULT, TROY PRES GARNER, LEE

427 5TH AVENUE 3962 WEST EAU GALLIE BOULEVARD

INDIALANTIC, FL 32903 US SUITE A

MELBOURNE, FL 32934 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: LEE GARNER 04/25/2012

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

PRES

CUMMINS, KATHLEEN Name: Address: POST OFFICE BOX 964 City-St-Zip: MELBOURNE, FL 32902 US

Title:

Name: ROSSELL, RICHARD Address: POST OFFICE BOX 964 City-St-Zip: MELBOURNE, FL 32902 US

Title: **TREA**

GARNER, LEE Name:

Address: POST OFFICE BOX 964 City-St-Zip: MELBOURNE, FL 32902 US

Title: SEC

Name: HUGHES, MARK Address: POST OFFICE BOX 964 City-St-Zip: MELBOURNE, FL 32902 US

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: LEE GARNER **TREA** 04/25/2012