

# 2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000001896

FILED  
Dec 11, 2008  
Secretary of State

**Entity Name:** THE SUCCESS PROJECT OF BREVARD INC

**Current Principal Place of Business:**

674 NORTH WICKHAM ROAD  
MELBOURNE, FL 32935 US

**New Principal Place of Business:**

1855 LANSING STREET  
MELBOURNE, FL 32935 US

**Current Mailing Address:**

674 NORTH WICKHAM ROAD  
MELBOURNE, FL 32935 US

**New Mailing Address:**

1855 LANSING STREET  
MELBOURNE, FL 32935 US

**FEI Number:** 20-3379713 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**  
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:**

FALES, HOLLY M  
205 BOSSIEUX STREET  
WEST MELBOURNE, FL 32904 US

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

FALES, HENRY R DIR  
1030 BEACON ST NW  
PALM BAY, FL 32907 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: HENRY FALES

12/11/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DIR ( ) Delete  
Name: FALES, HOLLY M  
Address: 205 BOSSIEUX  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: DIR ( ) Delete  
Name: FALES, HENRY R  
Address: 205 BOSSIEUX  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: DIR ( ) Delete  
Name: MARIAR, FOX  
Address: 7279 ACHILLES RD  
City-St-Zip: COCOA, FL 32927

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

Title: DIR (X) Change ( ) Addition  
Name: FALES, HOLLY M  
Address: 1030 BEACON ST NW  
City-St-Zip: PALM BAY, FL 32907

Title: DIR (X) Change ( ) Addition  
Name: FALES, HENRY R  
Address: 1030 BEACON ST NW  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: DIR (X) Change ( ) Addition  
Name: NUGENT, AUDREY G  
Address: 4474 LONG LAKE RD.  
City-St-Zip: MELBOURNE, FL 32907

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: HENRY FALES

DIR

12/11/2008

Electronic Signature of Signing Officer or Director

Date