2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006935

Entity Name: BROTHERS OF THE COASTS, INC.

FILED Apr 26, 2009 Secretary of State

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

11126 HARBOUR NORTH LANE 11360 TROTTING HORSE LN JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

Current Mailing Address: New Mailing Address:

11126 HARBOUR NORTH LANE 11360 TROTTING HORSE LN JACKSONVILLE, FL 32225 JACKSONVILLE, FL 32225

FEI Number: 20-3148414 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:

STEBBINS, WILLIAM

1275 SUNRAY COURT

JACKSONVILLE, FL 32218 US

RITCHIE, ROBERT

11360 TROTTING HORSE LN

JACKSONVILLE, FL 32225 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: ROBERT E RITCHIE 04/26/2009

Electronic Signature of Registered Agent Date

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

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

 Name:
 LECLERE, WILLIAM
 Name:
 RITCHIE, ROBERT

 Address:
 11126 HARBOUR NORTH LANE
 Address:
 11360 TROTTING HORSE LN

City-St-Zip: JACKSONVILLE, FL 32225 City-St-Zip: JACKSONVILLE, FL 32225

Title: VP () Delete Title: VP (X) Change () Addition Name: STEBBINS, WILLIAM Name: SIMON, ROGER

 Address:
 1275 SUNRAY COURT
 Address:
 5640 WILTSHIRE

 City-St-Zip:
 JACKSONVILLE, FL 32218
 City-St-Zip:
 JACKSONVILLE, FL 32211

 $\label{eq:title:fc} \mbox{Title:} \qquad \mbox{FC} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{FC} \qquad \mbox{(X) Change () Addition}$

 Name:
 TABER, MICHAEL
 Name:
 RITCHIE, GRETA

 Address:
 11131 CAROLINE CREST DRIVE
 Address:
 11360 TROTTING HORSE LN

 City-St-Zip:
 JACKSONVILLE, FL 32225
 City-St-Zip:
 JACKSONVILLE, FL 32225

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: GRETA RITCHIE FC 04/26/2009