## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N07000009645

FILED Aug 03, 2008 Secretary of State

Entity Name: SOUTH BREVARD SOCIETY FOR HUMAN RESOURCE MANAGEMENT, INC.

**Current Principal Place of Business: New Principal Place of Business:** 1 HARBOR PL. 1901 S HARBOR CITY BLVD #501 MELBOURNE, FL 32901 **Current Mailing Address: New Mailing Address:** 1 HARBOR PL, 1901 S HARBOR CITY BLVD #501 MELBOURNE, FL 32901 FEI Number: 26-1288738 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) 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: Name and Address of New Registered Agent: HAMENT, ANDREW S 1 HARBOR PL, 1901 S HARBOR CITY BLVD #501 MELBOURNE, FL 32901 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition SACK, KAREN SUTTLES, JOY Name: Name: 637 JUBILEE ST. Address: 446 TIMBERLAKE DRIVE Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: MELBOURNE, FL 32940 Title: DV () Delete Title: DV (X) Change ( ) Addition DOWNES, STEVE Name: FICK, SHELLEY Name: Address: 8500 RIDGEWOOD AVE., UNIT 103 Address: 3521 HOME TOWN LANE City-St-Zip: CAPE CANAVERAL, FL 32920 City-St-Zip: ST CLOUD, FL 34769 Title: DV () Delete Title: (X) Change ( ) Addition COBB, JACQUELINE CARNATHAN, CHRISTINE Name: Name: 600 A JOHN RODES BLVD. 2080 W EAU GALLIE BLVD STE A Address: Address: City-St-Zip: MELBOURNE, FL 32934 City-St-Zip: MELBOURNE, FL 32935 Title: DS () Delete Title: () Change () Addition CARDINALE, DIANE Name: Name: 1884 WINDING RIDGE CIR. SE Address: Address: City-St-Zip: PALM BAY, FL 32909 City-St-Zip: DT Title: () Delete Title: (X) Change ( ) Addition FICK, SHELLEY Name: Name: GLOADE, BRIAN 3521 HOME TOWN LANE 141 MASSINI AVE NW Address: Address: City-St-Zip: ST. CLOUD, FL 34769 City-St-Zip: PALM BAY, FL 32907 Title: ( ) Delete Title: () Change () Addition SCHWINDT, ROCHELLE Name: Name: Address: 1347 CENTENNIAL WAY Address: ROCKLEDGE, FL 32955 City-St-Zip: City-St-Zip:

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: BRIAN J GLOADE MR 08/03/2008