

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000002997

FILED  
Apr 28, 2010  
Secretary of State

**Entity Name:** MELBOURNE COMMUNITY SERVICE ORGANIZATION INC

**Current Principal Place of Business:**

2401 POST RD  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 360327  
MELBOURNE, FL 32936

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

PERTESIS, LEISA F  
351 TUSCANY WAY  
APT. 101  
MELBOURNE, FL 32940 US

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

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:**

Title: PRES  
Name: ADAIR, ROSS  
Address: 4407 YORKSHIRE DR  
City-St-Zip: MELBOURNE, FL 32935

Title: VP  
Name: MILLER, JACQUELINE V  
Address: 4407 YORKSHIRE DR  
City-St-Zip: MELBOURNE, FL 32935

Title: VP/T  
Name: PERTESIS, LOUIS J  
Address: 351 TUSCANY WAY APT 101  
City-St-Zip: MELBOURNE, FL 32904

Title: SECR  
Name: RUSSO, SUZANNE M  
Address: 4407 YORKSHIRE DR  
City-St-Zip: MELBOURNE, FL 32935

Title: DIR  
Name: PERTSIS, LEISA F  
Address: 351 TUSCANY WAY APT 101  
City-St-Zip: MELBOURNE, FL 32940

Title: DIR  
Name: RUSSO, RICHARD A  
Address: 4407 YORKSHIRE DR  
City-St-Zip: MELBOUR, FL 32935

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: LEISA F PERTESIS

DIR

04/28/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date