

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000007300

FILED  
Apr 22, 2009  
Secretary of State

**Entity Name:** BUSINESS VOICE OF EAST CENTRAL FLORIDA, INC.

**Current Principal Place of Business:**

1005 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901

**New Principal Place of Business:**

**Current Mailing Address:**

1005 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901

**New Mailing Address:**

**FEI Number:** 26-3120439

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOYD, JOEL E.  
360 N. BABCOCK ST., STE. 104  
MELBOURNE, FL 32935 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: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: TREA ( ) Change (X) Addition  
Name: HOWLETT, DALE  
Address: 8045 N. WICKHAM ROAD  
City-St-Zip: MELBOURNE, FL 32940

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: DALE HOWLETT

TREA

04/22/2009

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

\_\_\_\_\_  
Date