2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 05, 2011
Secretary of State

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Entity Name: BREVARD ALZHEIMER'S FOUNDATION ENDOWMENT FUND, INC.

Current Principal Place of Business:

4676 N. WICKHAM ROAD
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

4676 N. WICKHAM ROAD
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 27-1500421 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STAGMAN, CHRIS
4676 N. WICKHAM ROAD
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: D
Name: JOHNSON, WILLIAM
Address: 21 SUNTREE PLACE, SUITE 100
City-St-Zip: MELBOURNE, FL 32940

Title: D
Name: NIGRO, DR. BRUCE
Address: 8000 RON BEATTY BLVD, SUITE A-3
City-St-Zip: MICCO, FL 32976

Title: D
Name: BATTLE-HALL, RUTH
Address: 474 KREFELD ROAD NW
City-St-Zip: PALM BAY, FL 32907

Title: D
Name: FLEIS, EDWARD M P.E.
Address: 408 PENTLAND DRIVE
City-St-Zip: MELBOURNE, FL 32937

Title: D
Name: STAGMAN, CHRIS
Address: 4958 WEXFORD
City-St-Zip: MELBOURNE, FL 32955

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: CHRIS STAGMAN ED 01/05/2011
Electronic Signature of Signing Officer or Director Date