

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000004902

FILED
Mar 28, 2012
Secretary of State

Entity Name: BREVARD AIDING SHELTER ANIMALS PROJECT, INC.

Current Principal Place of Business:

5545 NORTH WICKHAM ROAD
UNIT 111
MELBOURNE, FL 32940 US

New Principal Place of Business:

Current Mailing Address:

5545 NORTH WICKHAM ROAD
UNIT 111
MELBOURNE, FL 32940 US

New Mailing Address:

FEI Number: 27-2625969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HARROWSMITH, CINDY
5545 NORTH WICKHAM ROAD
UNIT 111
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: DIR
Name: EAVENSON, TRIZIA ESQ
Address: 7777 N WICKHAM ROAD SUITE 12-707
City-St-Zip: MELBOURNE, FL 32940 US

Title: DIR
Name: MELLOR, NANCY
Address: 500 CRYSTAL LAKE DRIVE
City-St-Zip: MELBOURNE, FL 32940 US

Title: TREA
Name: WHERLEY, JAY
Address: 2291 GRAND TETON BOULEVARD
City-St-Zip: MELBOURNE, FL 32935 US

Title: SEC
Name: ALLEN, NANCY
Address: 136 CAVALIER STREET
City-St-Zip: PALM BAY, FL 32909 US

Title: VP
Name: BLICKLEY, DANA
Address: 3425 HERON LANE
City-St-Zip: TITUSVILLE, FL 32780 US

Title: PRES
Name: KEHOE, MARTHA
Address: 2011 ROCKLEDGE DR.
City-St-Zip: ROCKLEDGE, FL 32955 US

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: JAY WHERLEY

TREA

03/28/2012

_____ Electronic Signature of Signing Officer or Director

_____ Date