

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 06, 2009  
Secretary of State**

DOCUMENT# N10510

**Entity Name:** BREVARD ELECTRICAL GROUP NON-JOINT APPRENTICESHIP AND TRAINING PROGRAM, INC.

**Current Principal Place of Business:**

700 N WICKHAM RD.  
SUITE 108  
MELBOURNE, FL 32935

**New Principal Place of Business:**

**Current Mailing Address:**

700 N WICKHAM RD.  
SUITE 108  
MELBOURNE, FL 32935

**New Mailing Address:**

**FEI Number:** 59-2577488      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

CLOUTIER, RICHARD H  
700 N WICKHAM RD  
STE 108  
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: P ( ) Delete  
Name: CLOUTIER, RICHARD H  
Address: 2543 LEMON ST NE  
City-St-Zip: PALM BAY, FL 32905

Title: T ( ) Delete  
Name: MALONEY, RICHARD P  
Address: 420 S WICKHAM RD  
City-St-Zip: MELBOURNE, FL 32904

Title: S ( ) Delete  
Name: ELY, SAMUEL H  
Address: 161 PARKHILL BLVD.  
City-St-Zip: W MELBOURNE, FL 32904

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

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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: RICHARD P. MALONEY

T

04/06/2009

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

\_\_\_\_\_  
Date