

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21166

FILED
Aug 03, 2004
Secretary of State**Entity Name:** PARENT TO PARENT OF BREVARD, INC.**Current Principal Place of Business:**202 W. DRIVE
MELBOURNE, FL 32904 US**New Principal Place of Business:**442 PETAL ROAD NE
PALM BAY, FL 32907 US**Current Mailing Address:**202 W. DRIVE
1110 S. HICKORY ST.
MELBOURNE, FL 32904 US**New Mailing Address:**442 PETAL ROAD NE
PALM BAY, FL 32907 US**FEI Number:** 59-2837841**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**TOMAKA, TERRY A
202 WEST DR. ARC OF BROWARD
MELBOURNE, FL 32904 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:** PD () Delete
Name: GOLDEN, CHRISTINE M
Address: 1110 S. HICKORY ST.
City-St-Zip: MELBOURNE, FL 32901**Title:** TD () Delete
Name: APODACHA, ANDREA
Address: 202 W. DR.
City-St-Zip: PALM BAY, FL 32907**Title:** SD () Delete
Name: SCHINDEL, MARY JEAN
Address: 202 W. DR.
City-St-Zip: W. MELBOURNE, FL 32907**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PD (X) Change () Addition
Name: CANNON, SUE
Address: 442 PETAL ROAD NE
City-St-Zip: PALM BAY, FL 32907**Title:** TD (X) Change () Addition
Name: APODACHA, ANDREA
Address: 442 PETAL ROAD NE
City-St-Zip: PALM BAY, FL 32907**Title:** SD (X) Change () Addition
Name: RIZZO, HOLLY
Address: 442 PETAL ROAD NE
City-St-Zip: PALM BAY, FL 32907

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANDREA APODACA

TD

08/03/2004

Electronic Signature of Signing Officer or Director

Date