

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2007 8:00 am
Secretary of State

02-20-2007 90055 030 ****61.25

DOCUMENT # N27380 1. Entity Name GREENBRIAR VILLAGE HOMEOWNERS ASSOCIATION OF BREVARD, INC.					
Principal Place of Business C/O 1300 PINETREE DRIVE 9 INDIAN HARBOUR BEACH, FL 32935 US			Mailing Address C/O 1300 PINETREE DRIVE 9 INDIAN HARBOUR BEACH, FL 32937 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
DEPENDABLE PROPERTY MANAGEMENT, LLC 1300 PINETREE DRIVE 9 INDIAN HARBOUR BEACH, FL 32937				Name Coastal Association Mgmt, Inc Street Address (P.O. Box Number is Not Acceptable) 3612 Crossbow Dr City Cocoa	
				FL Zip Code 32926	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Patricia A. Palardy, Patricia A. Palardy, Vice President</u> <u>2-15-07</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAAPALA, MARTY 1665 PGA BLVD MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Durkin, Terry 413 Bouchelle Dr New Smyrna Bch, FL 32169	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEAN, DON 1719 NIKLAUS DRIVE MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DYSINGER, JOHN 1706 PGA BLVD MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SNYDER, TODD 1792 NIKLAUS DRIVE MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OFFICER, TOM 1720 PGA BLVD. MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D 	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>[Signature]</u> <u>2/17/07</u> <u>321-751-7122</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #					

40021633



02072007 Chg-NP CR2E037 (12/06)

4. FEI Number
59-2948094

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**