

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28421

FILED
Feb 24, 2011
Secretary of State

Entity Name: NORTH BREVARD CHARITIES SHARING CENTER, INC.

Current Principal Place of Business:

4475 S. HOPKINS AVE.
TITUSVILLE, FL 32780

New Principal Place of Business:

Current Mailing Address:

4475 S. HOPKINS AVE.
TITUSVILLE, FL 32780

New Mailing Address:

FEI Number: 59-3079635

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROBINSON, JOE C
5510 BENT OAK DR
TITUSVILLE, FL 32780 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: ED
Name: ROBINSON, JOE
Address: 5510 BENT OAK DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: P/D
Name: TAYLOR, EVELYN
Address: 2221 COUNTRY CLUB DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: 1V/D
Name: JOHNS, DIANNE
Address: 590 BELLA VISTA DR.
City-St-Zip: TITUSVILLE, FL 32780

Title: T/D
Name: METOFF, KEVIN
Address: 730 ELLIOT DR.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: S/D
Name: POBJECKY, RICHARD
Address: 3060 LAS PALMAS ST.
City-St-Zip: TITUSVILLE, FL 32780

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: JOE C. ROBINSON

ED

02/24/2011

Electronic Signature of Signing Officer or Director

Date