## 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N28421

Apr 26, 2012 Secretary of State

Entity Name: NORTH BREVARD CHARITIES SHARING CENTER, INC.

**New Principal Place of Business: Current Principal Place of Business:** 

4475 S. HOPKINS AVE. TITUSVILLE, FL 32780

**Current Mailing Address: New Mailing Address:** 

4475 S. HOPKINS AVE. TITUSVILLE, FL 32780

FEI Number: 59-3079635 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

ROBINSON, JOE C 5510 BENT OAK DR

TITUSVILLE, FL 32780 US

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:**

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

Title: P/D

Name: JOHNS, DIANNE Address: 590 BELLA VISTA DR. City-St-Zip: TITUSVILLE, FL 32780

Title: 1V/D

STEINLE, JERRY Name: Address: 1140 SHARON DR. City-St-Zip: TITUSVILLE, FL 32780

Title: T/D Name: VIERA, LIZ

951 N WASHINGTON AVE. Address: City-St-Zip: TITUSVILLE, FL 32780

Title: S/D

METOFF, KEVIN Name: 730 ELLIOT DR. Address:

MERRITT ISLAND, FL 32952 City-St-Zip:

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 04/26/2012