2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2008
Secretary of State

DOCUMENT# N29133

Entity Name: BREVARD FEDERATION OF TEACHERS, INC.

Current Principal Place of Business:

1007 S. FLORIDA AVENUE
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

1007 S. FLORIDA AVENUE
ROCKLEDGE, FL 32955 US

New Mailing Address:

FEI Number: 23-7402774 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPENCER, ANNE
1007 S FLORIDA AVE
ROCKLEDGE, FL 32955 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:	D	( ) Delete
Name:	RUSSO II, JOHN II	
Address:	4510 WESTVIEW LANE	
City-St-Zip:	TITUSVILLE, FL 32780	
Title:	D	( ) Delete
Name:	EASTMAN, JANET	
Address:	4745 BROOKHAVEN ST	
City-St-Zip:	COCOA, FL 32927	
Title:	D	( ) Delete
Name:	SPENCER, ANNE	
Address:	14 SOUTH STREET	
City-St-Zip:	COCOA, FL 32922	
Title:	D	( ) Delete
Name:	FOWLES, KIMBERLYN	
Address:	2544 RAINTREE LAKE CIR	
City-St-Zip:	MERRITT ISLAND, FL 32953	
Title:	D	( ) Delete
Name:	VINCENT, SUSAN	
Address:	449 WILLOW TREE DRIVE	
City-St-Zip:	MELBOURNE, FL 32940	
Title:	D	( ) Delete
Name:	HERZ, LINDA	
Address:	1154 ABBEY CIRCLE NE	
City-St-Zip:	PALM BAY, FL 32905	

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:	
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: ANNE SPENCER RA 01/25/2008

Electronic Signature of Signing Officer or Director — Date