

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39548

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** CENTRAL BREVARD LIBRARY & REFERENCE CENTER GIFT SHOP, INC.

**Current Principal Place of Business:**

308 FORREST AVENUE  
ATTENTION: SCHWEINSBERG, JOHN R.  
COCOA, FL 32922

**New Principal Place of Business:**

**Current Mailing Address:**

308 FORREST AVENUE  
ATTENTION: SCHWEINSBERG, JOHN R.  
COCOA, FL 32922

**New Mailing Address:**

**FEI Number:** 59-2991079

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

JOHNSON, CAMILLE W  
308 FORREST AVENUE  
COCOA, FL 32922 US

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

SCHWEINSBERG, CATHERINE C DIRECTO  
308 FORREST AVENUE  
COCOA, FL 32922 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: CATHERINE C. SCHWEINSBERG

01/28/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KITE-POWELL, REV. CANON R  
Address: 3228 FORREST HILLS DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: SHEARER, PAT  
Address: 1046 FAIRLAWN DR  
City-St-Zip: ROCKLEDGE, FL 32955

Title: DS (X) Delete  
Name: ELIZABETH ARMISTEAD,  
Address: 56 VALENCIA RD  
City-St-Zip: ROCKLEDGE, FL

Title: C ( ) Delete  
Name: WILSON, LORETTA,  
Address: 1330 STETSON COURT  
City-St-Zip: COCOA, FL

Title: T ( ) Delete  
Name: SCHWEINSBERG, JOHN R  
Address: 5807 N ATLANTIC AVENUE, UNIT #415  
City-St-Zip: CAPE CANAVERAL, FL 329203958

**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:

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: JOHN R. SCHWEINSBERG

TREA

01/28/2009

Electronic Signature of Signing Officer or Director

Date