

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000026

FILED
May 05, 2009
Secretary of State

Entity Name: PRENATAL AND INFANT HEALTH CARE COALITION OF BREVARD COUNTY, INC.

Current Principal Place of Business:

1770 CEDAR ST
BLDG 5
ROCKLEDGE, FL 32955 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 560868
ROCKLEDGE, FL 329560868 US

New Mailing Address:

FEI Number: 59-3152532 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FLOYD, JENNIFER S
1770 CEDAR ST., BLDG #5
ROCKLEDGE, FL 32955 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:

Title: VD () Delete
Name: HADDEN, E.E. JR
Address: 945 S. ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: CD () Delete
Name: KNIPPEL, WENDY
Address: 435 FOOTMAN LN
City-St-Zip: MERRITT ISLAND, FL 32952

Title: M () Delete
Name: FLOYD, JENNIFER S
Address: 1770 CEDAR ST., BLDG #5
City-St-Zip: ROCKLEDGE, FL 32955

Title: TD () Delete
Name: TOLSON, SHARON
Address: 2700 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940

Title: SD () Delete
Name: KWIATKOWSKI, TERESASE DR
Address: 255 FORTEN BERRY RD. SUITE A1
City-St-Zip: ROCKLEDGE, FL 32959

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: M (X) Change () Addition
Name: HADDEN, E.E. JR
Address: 945 S. ATLANTIC AVENUE
City-St-Zip: COCOA BEACH, FL 32931

Title: TD (X) Change () Addition
Name: KNIPPEL, WENDY
Address: 435 FOOTMAN LN
City-St-Zip: MERRITT ISLAND, FL 32952

Title: MD (X) Change () Addition
Name: FLOYD, JENNIFER S
Address: 1770 CEDAR ST., BLDG #5
City-St-Zip: ROCKLEDGE, FL 32955

Title: CD (X) Change () Addition
Name: TOLSON, SHARON
Address: 2700 JUDGE FRAN JAMIESON WAY
City-St-Zip: VIERA, FL 32940

Title: VD (X) Change () Addition
Name: KWIATKOWSKI, TERESASE DR
Address: 255 FORTEN BERRY RD. SUITE A1
City-St-Zip: ROCKLEDGE, FL 32959

Title: SD () Change (X) Addition
Name: HAYDEN, MARC D
Address: 1623 QUINN DRIVE
City-St-Zip: ROCKLEDGE, FL 32955

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: JENNIFER S. FLOYD

MD

05/05/2009

Electronic Signature of Signing Officer or Director

Date