

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000026

FILED
Mar 15, 2011
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 ()

Name and Address of Current Registered Agent:

FLOYD, JENNIFER S
1770 CEDAR ST., BLDG #5
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: SD
Name: FLEEMAN, R A
Address: 3304 BURKELAND PLACE
City-St-Zip: MELBOURNE, FL 32934 US

Title: D
Name: KNIPPEL, WENDY
Address: 435 FOOTMAN LN
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: MD
Name: FLOYD, JENNIFER S
Address: 1770 CEDAR ST., BLDG #5
City-St-Zip: ROCKLEDGE, FL 32955 US

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

Title: CD
Name: KWIATKOWSKI, TEREASE DR
Address: 255 FORTENBERRY RD. SUITE A1
City-St-Zip: ROCKLEDGE, FL 32959 US

Title: VD
Name: VIOLET, SUZANNE
Address: 1485 N. ATLANTIC AVE #116
City-St-Zip: COCOA BEACH, FL 32931 US

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: JENNIFER S. FLOYD

MD

03/15/2011

Electronic Signature of Signing Officer or Director

Date