

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000002258

FILED  
Mar 23, 2009  
Secretary of State

Entity Name: LEAD BREVARD, INC.

## Current Principal Place of Business:

430 BREVARD AVE  
COCOA, FL 32922 US

## New Principal Place of Business:

## Current Mailing Address:

P.O BOX 836  
COCOA, FL 32923 US

## New Mailing Address:

FEI Number: 59-3189067

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

BAKKE, KRISTIN L PRESIDE  
C/O LEAD BREVARD  
430 BREVARD AVE  
COCOA, FL 32922 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: O/D ( ) Delete  
Name: CAMPANINI, BINO MR.  
Address: 8680 N. ATLANTIC AVENUE  
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: O/D ( ) Delete  
Name: MOORE, KENDALL MR  
Address: 1290 FEDERAL HWY (US 1)  
City-St-Zip: ROCKLEDGE, FL 32955 US

Title: O/D ( ) Delete  
Name: BREITFELLER, JASON MR  
Address: 1574 SUNGAZER DRIVE  
City-St-Zip: VIERA, FL 32940 US

Title: PRES ( ) Delete  
Name: BAKKE, KRISTIN MS.  
Address: 430 BREVARD AVE  
City-St-Zip: COCOA, FL 32922 US

Title: O/D ( ) Delete  
Name: ANDERSON, JAY MR.  
Address: 8240 DEVEREUX DRIVE  
City-St-Zip: MELBOURNE, FL 32940 US

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

## 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: O/D (X) Change ( ) Addition  
Name: CARLSON, SUE MS.  
Address: 3422 KENT DRIVE  
City-St-Zip: MELBOURNE, FL 32935 US

Title: O/D ( ) Change (X) Addition  
Name: EAVENSON, ERIK  
Address: 6767 N WICKHAM ROAD  
City-St-Zip: MELBOURNE, FL 32940

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: KRISTIN L. BAKKE

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date