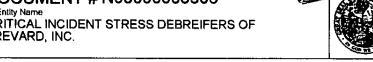
2008 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N93000003506 1. Entity Name CRITICAL INCIDENT STRESS DEBREIFERS OF BREVARD, INC.

FILED Apr 07, 2008 08:00 Af Secretary of State



Principal Place of Business 1040 S. FLORIDA AVE.

Mailing Address P.O BOX 116 SHARPES, FL 32959



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

04022008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2874812 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

MONEY, JEFFREY P 1040 SOUTH FLORIDA AVE ROCKLEDGE, FL 32955

SIGNATURE:

ROCKLEDGE, FL 32955

DO NOT WRITE IN THIS SPACE

02 APRIL 2008

321 633 4388

Daytime Phone #

8. 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. I am familiar with, and accept the obligations of registered agent. 4-4-08					
SIGNATURE					
	Filing Fee is \$61.25 Due by May 1, 2008	Election Campaign Financ Trust Fund Contribution.	sing \$5.00 May Be	U00000885852 04/18/08-80031-00	1 70.00
10.	OFFICERS AND DIREC	TORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD TRAINER, CHERYL 1040 S. FLORIDA AVE ROCKLEDGE, FL 32955				
NAME STREET ADDRESS CITY-ST-ZIP	STD HECKY, CHERYL 7055 BRYANT ROAD COCOA, FL 32927				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MONEY, JEFFREY P 1040 S. FLORIDA AVE ROCKLEDGE, FL 32927		DO	NOT WRITE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					