

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001481

FILED
Feb 08, 2011
Secretary of State

Entity Name: BIRTHRIGHT OF MELBOURNE, INC.

Current Principal Place of Business:

814 MELBOURNE AVE.
MELBOURNE, FL 32901

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2044
MELBOURNE, FL 329022044

New Mailing Address:

FEI Number: 59-3250234

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MARIAN, VONNIE
2085 S RIVER ROAD
MELBOURNE BEACH, FL 32951 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: DV
Name: ALLEN, MARY
Address: 145 ORLANDO BLVD
City-St-Zip: INDIALANTIC, FL 32903

Title: D
Name: HOLLAND, JACKIE
Address: 3209 RIVER WIND CT
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: STD
Name: MARIAN, VONNIE
Address: 2085 S. RIVER RD.
City-St-Zip: MELBOURNE, FL 32951

Title: DP
Name: JEFFREYS, MARYLIN
Address: 240 HAMMOCK SHORE DR
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: DP
Name: ASHWELL, CAROL
Address: 293 ALBACORE PLACE
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D
Name: EASTON, NANCY A
Address: 170 WHALER DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951 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: VONNIE MARIAN

STD

02/08/2011

_____ Electronic Signature of Signing Officer or Director

_____ Date