2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400006230

FILED Mar 19, 2009 Secretary of State

Entity Name: BUILDING OFFICIALS ASSOCIATION OF BREVARD COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 1600 HUNTINGTON LANE ROCKLEDGE, FL 32955 **Current Mailing Address: New Mailing Address:** 1600 HUNTINGTON LANE ROCKLEDGE, FL 32955 FEI Number: 59-3336413 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MARIAN, JOHN F 2085 SOUTH RIVER ROAD MELBOURNE BEACH, FL 32951 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete (X) Change () Addition COLEMAN, GEORGE CONNELLY, JOHN Name: Name: 2285 MINTON ROAD Address: 5240 BABCOCK STREET, STE 105 Address: City-St-Zip: WEST MELBOURNE, FL 32940 City-St-Zip: PALM BAY, FL 32905 Title: PD () Delete Title: (X) Change () Addition JONES, CARL L Name: COLEMAN, GEORGE L Name: Address: 1600 HUNTINGTON LANE Address: 2285 MINTON ROAD City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: WEST MELBOURNE, FL 32940 Title: STD () Delete Title: () Change () Addition CURTIS, MADILANA K Name: Name: 1600 HUNTINGTON LANE Address: Address: City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: Title: () Delete Title: (X) Change () Addition MORLEY, TODD Name: Name: JONES, CARL L 1600 HUNTINGTON LANE Address: 105 POLK AVENUE Address: City-St-Zip: CAPE CANAVERAL, FL 32920 City-St-Zip: ROCKLEDGE, FL 32955 Title: () Delete Title: () Change () Addition BEYER, AL F Name: Name: 900 E. STRAWBRIDGE AVE. Address: Address: City-St-Zip: MELBOURNE, FL 32901 City-St-Zip: Title: () Delete Title: () Change () Addition DURHAM, RALPH JR Name: Name: Address: 1973 GUAVA AVENUE Address: MELBOURNE, FL 32935 City-St-Zip: City-St-Zip:

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: MADILANA CURTIS STD 03/19/2009