

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005824

FILED
Apr 23, 2010
Secretary of State

Entity Name: BREVARD ALZHEIMER'S FOUNDATION, INC.

Current Principal Place of Business:

4676 N WICKHAM RD
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

4676 N WICKHAM RD
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 59-3369526

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STAGMAN, CHRISTOPHER M
5421 BRIDGE ROAD
COCOA, FL 32927 US

Name and Address of New Registered Agent:

STAGMAN, CHRISTOPHER M
4959 WEXFORD
MELBOURNE, FL 32955 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:

04/23/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CM
Name: JOHNSON, WILLIAM
Address: 21 SUNTREE PLACE, SUITE 100
City-St-Zip: MELBOURNE, FL 32940 US

Title: VCM
Name: NIGRO, BRUCE DR.
Address: 8000 RON BEATTY BLVD, SUITE A-3
City-St-Zip: MICCO, FL 32976 US

Title: S
Name: BATTLE-HALL, RUTH
Address: 474 KREFELD ROAD, NW
City-St-Zip: PALM BAY, FL 32907 US

Title: D
Name: STAGMAN, CHRISTOPHER M
Address: 4958 WEXFORD
City-St-Zip: MELBOURNE, FL 32955

Title: T
Name: FLEIS, EDWARD
Address: 408 PENTLAND DRIVE
City-St-Zip: MELBOURNE BEACH, FL 32951

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: CHRIS STAGMAN

MR.

04/23/2010

Electronic Signature of Signing Officer or Director

Date