

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000004994

FILED
Apr 21, 2009
Secretary of State

Entity Name: THE BREVARD NEIGHBORHOOD DEVELOPMENT COALITION, INC.

Current Principal Place of Business:

1151 MASTERSON ST
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

P O BOX 361104
MELBOURNE, FL 32936 US

New Mailing Address:

FEI Number: 59-3483505

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PRESTWOOD, ALAN
2104 S WAVERLY PLACE
MELBOURNE, FL 32901 US

Name and Address of New Registered Agent:

KLEIN, RON
917 VERSAILLES CT.
MELBOURNE, FL 32940 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: RON KLEIN

04/21/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HOLEMAN, VAUGHN
Address: 2101 S WAVERLY PL
City-St-Zip: MELBOURNE, FL 32901

Title: T () Delete
Name: MILLER, KIMBERLY A
Address: 333 SOUTH POINT CT
City-St-Zip: SATELLITE BEACH, FL 32937

Title: S () Delete
Name: PRESSLEY, MARGIE
Address: 1026 COLEMAN ST
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: MAXIE, IANTHE
Address: 4043 MALLARD DR
City-St-Zip: MELBOURNE, FL 32934

Title: D () Delete
Name: HEMLEY, CARLTON
Address: 167 KRASSNER DR NW
City-St-Zip: PALM BAY, FL 32907

Title: D () Delete
Name: JOHNSON, STEVE
Address: 125 DELLWOOD CT SE
City-St-Zip: PALM BAY, FL 32909

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KLEIN, RON
Address: 917 VERSAILLES CT.
City-St-Zip: MELBOURNE, FL 32940

Title: T (X) Change () Addition
Name: WENTE, BRENT
Address: 2627 W. EAU GALLIE BLVD.
City-St-Zip: MELBOURNE, FL 32935

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: HOLEMAN, VAUGHN
Address: 2101 S. WAVERLY PL.
City-St-Zip: MELBOURNE, FL 32901

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: WALKER, DAVID
Address: 1084 MATHERS ST.
City-St-Zip: MELBOURNE, FL 32935

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: RON KLEIN

P

04/21/2009

Electronic Signature of Signing Officer or Director

Date