

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2006 8:00 am
Secretary of State

02-21-2006 90028 013 ****61.25

DOCUMENT # N98000006862 1. Entity Name BREVARD NATURE ALLIANCE, INC.					
Principal Place of Business 2000 S WASHINGTON AVE TITUSVILLE, FL 32780				Mailing Address P.O. BOX 423 TITUSVILLE, FL 32781	
2. Principal Place of Business 1795 POINCIANA AVE Suite, Apt. #, etc.		3. Mailing Address P.O. Box 517 Suite, Apt. #, etc.			
City & State Titusville, FL		City & State Titusville, FL		4. FEI Number 59-3558063	
Zip 32796		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KOLLER, ALBERT M JR 2645 ROYAL OAK DRIVE TITUSVILLE, FL 32780				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE D <input type="checkbox"/> Delete NAME THOMPSON, LAURILEE STREET ADDRESS 1475 GARDEN STREET CITY-ST-ZIP TITUSVILLE, FL 32796			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE D <input type="checkbox"/> Delete NAME BIRCH, ANNE STREET ADDRESS 2205 SEA AVE CITY-ST-ZIP INDIALANTIC, FL 32903			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
TITLE SD <input type="checkbox"/> Delete NAME EVANS, NANCY STREET ADDRESS 3455 CHENEY HIGHWAY CITY-ST-ZIP TITUSVILLE, FL 32780			TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME SD EVANS, NANCY STREET ADDRESS 3400 NORTH ATLANTIC AVE CITY-ST-ZIP COCOA BEACH, FL 32931		
TITLE DVC <input type="checkbox"/> Delete NAME HINKLE, ROSS STREET ADDRESS 6475 WINDOVER WAY CITY-ST-ZIP TITUSVILLE, FL 32780			TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME YC HINKLE, ROSS STREET ADDRESS MAIL CODE: DYN CITY-ST-ZIP KSC, FL 32899		
TITLE TD <input type="checkbox"/> Delete NAME JOHNSON, WALT STREET ADDRESS 2000 S. WASHINGTON AVENUE STE 2 CITY-ST-ZIP TITUSVILLE, FL 32780			TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition NAME TD JOHNSON, WALT STREET ADDRESS 604 BROAD ST. CITY-ST-ZIP TITUSVILLE, FL 32796		
TITLE <input type="checkbox"/> Delete NAME STREET ADDRESS CITY-ST-ZIP			TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing 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.					
SIGNATURE: Ron Thorstad - RON THORSTAD 2-13-06 321 268-5224					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

ATTACHMENT

40015914

BREVARD NATURE ALLIANCE, INC.
ADDITION TO 2006 UBR DOCUMENT #N98000006862
P. O. BOX 517
TITUSVILLE, FL 32781

FEI #59-3558063

ADDITIONS TO OFFICERS/DIRECTORS for Block 11:

TITLE: C
NAME: Ron Thorstad
STREET ADDRESS: 30 Holiday Lane
CITY-ST-ZIP: Titusville, FL 32796

TITLE: VC
NAME: Leesa Souto
STREET ADDRESS: 108 S. Babcock Street
CITY-ST-ZIP: Melbourne, FL 32901

TITLE: D
NAME: D. Scott Taylor
STREET ADDRESS: 676 Acacia Avenue
CITY-ST-ZIP: Melbourne Village, FL 32904-2302

TITLE: V/C
NAME: Bob Day
STREET ADDRESS: 525 Community College Parkway S.E.
CITY-ST-ZIP: Palm Bay, FL 32909

TITLE: D
NAME: George Geletko
STREET ADDRESS: P. O. Box 120189
CITY-ST-ZIP: West Melbourne, FL 32910-0189

TITLE: D
NAME: Richard "Hutch" Hutcherson
STREET ADDRESS: 1300 N. Atlantic Avenue
CITY-ST-ZIP: Cocoa Beach, FL 32931

TITLE: D
NAME: Jeannie Adame
STREET ADDRESS: P. O. Box 267
CITY-ST-ZIP: Cape Canaveral, FL 32920

TITLE: D
NAME: Virginia Barker
STREET ADDRESS: 2738 School Drive, NE
CITY-ST-ZIP: Palm Bay, FL 32905

ATTACHMENT

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FEI #59-3558063

ADDITIONS TO OFFICERS/DIRECTORS for Block 11:

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TITLE:	D
NAME:	Brent Marshall
STREET ADDRESS:	P. O. Box 25000
CITY-ST-ZIP:	Orlando, FL 32816-1360

TITLE:	D
NAME:	Keith Winsten
STREET ADDRESS:	8225 North Wickham Road
CITY-ST-ZIP:	Melbourne, FL 32940