2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005224

Apr 15, 2009 Secretary of State

Entity Name: THE FRIENDS OF THE CHILDREN'S ADVOCACY CENTER OF BREVARD, INC.

Current Principal Place of Business: New Principal Place of Business:

2 SUNTREE PLACE 1133 SEMINOLE DRIVE MELBOURNE, FL 32940 ROCKLEDGE, FL 32955

Current Mailing Address: New Mailing Address:

2 SUNTREE PLACE
MELBOURNE, FL 32940

1133 SEMINOLE DRIVE
ROCKLEDGE, FL 32955

FEI Number: 59-3596344 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:

ANDERSON, J. PATRICK 930 S. HARBOR CITY BLVD., STE 505 MELBOURNE, FL 32901 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:

 Title:
 PTD () Delete
 Title:
 PD (X) Change () Addition

 Name:
 WHITTAKER, KENNETH
 Name:
 SANFORD, HELENE

 Address:
 1692 W HIBISCUS BLVD
 Address:
 4034 FENROSE DRIVE

 City-St-Zip:
 MELBOURNE, FL 32901
 City-St-Zip:
 MELBOURNE, FL 32940

Title: VTD Title: (X) Change () Addition () Delete BROCK, DAVID Name: HEMMENWAY, DON Name: Address: 1020 US HIGHWAY 1 Address: 2401 PALM BAY ROAD NE City-St-Zip: ROCKLEDGE, FL 32955 City-St-Zip: PALM BAY, FL 32902

Title: () Delete Title: (X) Change () Addition SANFORD, HELENE WHITTAKER, KENNETH A Name: Name: 4034 FENROSE CIR 1133 SEMINOLE DRIVE Address: Address: City-St-Zip: MELBOURNE, FL 32940 City-St-Zip: ROCKELDGE, FL 32955

Title: D () Delete Title: SD (X) Change () Addition

 Name:
 HEMMENWAY, DON
 Name:
 BROCK, DAVID

 Address:
 2401 PALM BAY RD NE
 Address:
 1030 S US HIGHWAY 1

 City-St-Zip:
 MELBOURNE, FL 32902
 City-St-Zip:
 ROCKLEDGE, FL 32955

Title: D () Delete Title: () Change () Addition

 Name:
 WOLFINGER, NORMAN
 Name:

 Address:
 2725 JUDGE FRAN JAMIESON WAY BLDG D
 Address:

 City-St-Zip:
 VIERA, FL 32940
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 KING, MAXWELL
 Name:

 Address:
 1384 WALTON HEALTH CT
 Address:

 City-St-Zip:
 ROCKLEDGE, FL 32955
 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: HELENE SANFORD PRES 04/15/2009