

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005224

FILED
Apr 09, 2012
Secretary of State

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

Current Principal Place of Business:

1133 SEMINOLE DRIVE
ROCKLEDGE, FL 32955

New Principal Place of Business:

Current Mailing Address:

1133 SEMINOLE DRIVE
ROCKLEDGE, FL 32955

New Mailing Address:

FEI Number: 59-3596344

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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:

Title: PD
Name: COLEMAN, RANDALL
Address: 775 E. MERRITT ISLAND CSWY., SUITE 300
City-St-Zip: MERRITT ISLAND, FL 32952

Title: TD
Name: HEMMENWAY, DON
Address: 1650 ROBERT CONLON BLVD.
City-St-Zip: PALM BAY, FL 32905

Title: VD
Name: GWIAZDA, KIMBERLY
Address: 2725 JUDGE FRAN JAMIESON WAY, BLDG. D
City-St-Zip: VIERA, FL 32940

Title: SD
Name: PICKETT, ANDREW
Address: 2725 JUDGE FRAN JAMIESON WAY, BLDG D
City-St-Zip: MELBOURNE, FL 32940

Title: VPFD
Name: ADAVASIO, PETA
Address: 410 RIO VISTA LANE
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VPFD
Name: SPEARMAN, DELORES
Address: 51 RIDGE COURT
City-St-Zip: ROCKLEDGE, FL 32955

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: RANDALL COLEMAN

PD

04/09/2012

Electronic Signature of Signing Officer or Director

Date