2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000160395

Entity Name: BEACHY KLEEN OF BREVARD, INC.

FILED Sep 05, 2006 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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1684 CYPRESS AVE MELBOURNE, FL 32940

Current Mailing Address: New Mailing Address:

1684 CYPRESS AVE MELBOURNE, FL 32940

FEI Number: 30-0287311 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

RICH, MEGAN ERBE, MEGAN E 1684 CYPRESS AVE 1684 CYPRESS AVE

MELBOURNE, FL 32940 MELBOURNE, FL 32940 US 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: MEGAN E ERBE 09/05/2006

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition RICH, MEGAN Name: Name: ERBE, MEGAN

50 BERKLEY ST APT 215A 27 EMERALD COURT Address: Address: City-St-Zip: SATELLITE BCH, FL 32937 City-St-Zip: SATELLITE BCH, FL 32937

Title: VD Title: VD () Delete (X) Change () Addition Name: Name: ERBE. CHRISTOPHER

ERBE, CHRISTOPHER 50 BERKLEY ST APT 215A 27 EMERALD COURT Address: Address: SATELLITE BCH, FL 32937 SATELLITE BCH, FL 32937 City-St-Zip: City-St-Zip:

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

DENNING, BRIAN Name: Name: 214 ATALNTIC BLVD Address: Address:

City-St-Zip: INDIAN HARBOR BEACH, FL 32937 City-St-Zip:

Title: SIID (X) Delete Title: () Change () Addition

WRIGHT, EDSEL Name: Name: Address: 2995 ONTARIO CIR Address: City-St-Zip: MELBOUNRE, FL 32935 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTOPHER ERBE VD 09/05/2006