

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000002784

FILED
Jan 29, 2024
Secretary of State
5446008656CC

Entity Name: THE BREVARD HEALTH ALLIANCE, INC.

Current Principal Place of Business:

4315 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904

Current Mailing Address:

4315 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904 US

FEI Number: 90-0068515

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MALEK, JOHN
4315 WOODLAND PARK DRIVE
WEST MELBOURNE, FL 32904 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: JOHN MALEK

01/29/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VICE CHAIRMAN, VC, CONSUMER REPRESENTATIVE
Name SHEA, ERIN
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CEO
Name HELTON, RICHARD AUSTIN
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title COO
Name ANDERSON, MAEGEN
Address 2120 SARNO ROAD
City-State-Zip: MELBOURNE FL 32935

Title HEALTHCARE REPRESENTATIVE
Name ESROCK, BRETT
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title PUBLIC HOUSING REPRESENTATIVE, HOMELESS POPULATION REP., CONSUMER REP
Name DONALD, KEITH
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CHAIRMAN, CONSUMER REPRESENTATIVE
Name SANTIAGO, ROBERT
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title GENERAL COUNSEL
Name MALEK, JOHN
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CFO
Name NESCIO, RICHARD
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

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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: JOHN MALEK

GENERAL COUNSEL

01/29/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title CMO
Name SCHUCK, THEODORE
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CONSUMER REP COMMUNITY REP
Name BROWNE, COLLEEN
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CONSUMER REP COMMUNITY REP, TREASURER
Name FLYNN, JOSEPH
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title CONSUMER REPRESENTATIVE
Name RANDLOV, MARK
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title COMMUNITY REPRESENTATIVE,
SECRETARY
Name PETTIGREW, LEIGH
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904

Title COMMUNITY REP
Name FORBES, J. BARRY
Address 4315 WOODLAND PARK DRIVE
SUITE 101
City-State-Zip: MELBOURNE FL 32904

Title CONSUMER REPRESENTATIVE
Name CUMMINGS-WILSON, SONJA
Address 4315 WOODLAND PARK DRIVE
City-State-Zip: WEST MELBOURNE FL 32904