

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N05000001634

**Entity Name:** BREVARD HEAT, INC.

**Current Principal Place of Business:**

1583 BREEZEWOOD LANE NW  
PALM BAY, FL 32907

**Current Mailing Address:**

PO BOX 1283  
MELBOURNE, FL 32902

**FEI Number:** 20-2371018

**Certificate of Status Desired:** No

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

MCGARRIGLE, MICHAEL  
1128 SEMINOLE DRIVE  
INDIAN HARBOUR BEACH, FL 32937 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:** MICHAEL MCGARRIGLE

10/29/2018

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title TREA  
Name PALMER, DEBBIE  
Address 1455 TALON WAY  
City-State-Zip: MELBOURNE FL 32934

Title SEC  
Name MCGARRIGLE, MICHAEL  
Address 1128 SEMINOLE DRIVE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title PRESIDENT  
Name FRISCO, JEFFREY  
Address 1583 BREEZEWOOD LANE NW  
City-State-Zip: PALM BAY FL 32907

Title VP  
Name MCGARRIGLE, MICHAEL  
Address 1128 SEMINOLE DRIVE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DIRECTOR  
Name MCGARRIGLE, LISA  
Address 1128 SEMINOLE DRIVE  
City-State-Zip: INDIAN HARBOUR BEACH FL 32937

Title DIRECTOR  
Name BOWEN, RICHARD  
Address 5011 SOMERVILLE DRIVE  
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR  
Name BOWEN, DARRAH  
Address 5011 SOMERVILLE DRIVE  
City-State-Zip: ROCKLEDGE FL 32955

Title DIRECTOR  
Name GOREY JR, KENNETH  
Address 298 DRISKELL STREET NE  
City-State-Zip: PALM BAY FL 32907

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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:** MICHAEL MCGARRIGLE

SECRETARY

10/29/2018

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title            DIRECTOR  
Name            GOREY, TAMMY MAYLYN  
Address        298 DRISKELL STREET NE  
City-State-Zip: PALM BAY FL 32907