## 2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011357

Entity Name: FAMILIES EXPLORING DOWN SYNDROME OF BREVARD, INC.

FILED Feb 23, 2016 Secretary of State CC8974306458

Date

## **Current Principal Place of Business:**

1170 GRAND CAYMAN DR MERRITT ISLAND. FL 32952

## **Current Mailing Address:**

1170 GRAND CAYMAN DR MERRITT ISLAND. FL 32952 US

FEI Number: 32-0185913 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

GRIFFIN, ARDATH 1170 GRAND CAYMAN DR MERRITT ISLAND, FL 32952 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: ARDATH GRIFFIN 02/23/2016

Electronic Signature of Registered Agent

Officer/Director Detail:

Title PRESIDENT Title VP

Name TIMBERLAKE, VICTORIA Name SICOLI, LYNN

Address 6464 BETTY AVE Address 1507 DONEGAL DR

City-State-Zip: COCOA FL 32927 City-State-Zip: MELBOURNE FL 32940

TitleTTitleSECRETARYNameGRIFFIN, ARDATHNameKIERNAN, TRACY

Address 1170 GRAND CAYMAN DR Address 4288 CHASTAIN DRIVE

City-State-Zip: MERRITT ISLAND FL 32952 City-State-Zip: MELBOURNE FL 32940

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: ARDATH F GRIFFIN TREASURER

ER 02/23/2016