

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000009621

Entity Name: BREVARD MEDICAL CITY ONE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

6619 N WICKHAM RD
MELBOURNE, FL 32940

Current Mailing Address:

6619 NORTH WICKHAM ROAD
SUITE 102
MELBOURNE, FL 32940 US

FEI Number: 47-2835788

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PICKLES, TIMOTHY F ESQ.
653 BEVARD AVE
COCOA, FL 32922 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: TIMOTHY F. PICKLES

04/18/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name HARDOON, ABE
Address 6619 N WICKHAM RD
City-State-Zip: MELBOURNE FL 32940

Title SECRETARY, DIRECTOR
Name HARDOON, ERIC
Address 6619 N WICKHAM RD
City-State-Zip: MELBOURNE FL 32940

Title VP
Name FERRARO, CARMINE
Address 3860 CURTIS BLVD
 SUITE 636
City-State-Zip: COCOA FL 32927

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: CARMINE FERRARO

VICE PRESIDENT

04/18/2018

Electronic Signature of Signing Officer/Director Detail

Date