

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50743

FILED
Apr 12, 2018
Secretary of State
CC4596018394

Entity Name: BREVARD REACHING OUT, INC.

Current Principal Place of Business:

1 GANNETT PLAZA
MELBOURNE, FL 32940

Current Mailing Address:

P.O. BOX 419000
MELBOURNE, FL 32941-9000 US

FEI Number: 59-3158416

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BURGESS, LANDRA L
ONE GANNETT PLAZA
MELBOURNE, FL 32940 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: LANDRA BURGESS

04/12/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DCP
Name GABORDI, BOB
Address 1 GANNETT PLAZA
City-State-Zip: MELBOURNE FL 32940

Title DVP
Name KAISER, REGINA
Address 1 GANNETT PLAZA
City-State-Zip: MELBOURNE FL 32940

Title DT
Name BURGESS, LANDRA
Address 1 GANNETT PLAZA
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR
Name COLEMAN, MICHAEL
Address 2485 S. ATLANTIC AVENUE
UNIT 7
City-State-Zip: COCOA BEACH FL 32931

Title DIRECTOR
Name CONTRERAS, RICHARD
Address P.O. BOX 360862
City-State-Zip: MELBOURNE FL 32936-0862

Title DIRECTOR
Name KILBORNE, DANA
Address 7115 S. TROPICAL TRAIL
City-State-Zip: MERRITT ISLAND FL 32952

Title DIRECTOR
Name DAVIES, CRIS
Address 121 CHIPOLA ROAD
City-State-Zip: COCOA BEACH FL 32931

Title DS
Name MCLOUGHLIN, STEPHANIE
Address 1 GANNETT PLAZA
City-State-Zip: MELBOURNE FL 32940

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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: LANDRA BURGESS

**TREASURER, BREVARD
REACHING OUT**

04/12/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name JOHNSON, SHELLEY
Address 327 DELAND AVENUE
City-State-Zip: INDIALANTIC FL 32903

Title DIRECTOR
Name MEERS, MELINDA
Address 4955 RIVERSIDE BLVD
City-State-Zip: MELBOURNE FL 32935

Title DIRECTOR
Name WILLIAMS, CASSIE
Address 3520 BULL RUN CT.
City-State-Zip: MELBOURNE FL 32934

Title DIRECTOR
Name MIKOLAJCZYK, MARK
Address CRAIG TECHNOLOGIES
7195 MURRELL ROAD SUITE 101
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR
Name SORENSEN, JOAN
Address SORENSEN ALLIED MOVING AND
STORAGE
950 EAU GALLIE BLVD.
City-State-Zip: MELBOURNE FL 32935