

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 707080

1. Entity Name

BREVARD COUNTY AIR AND POWER BOAT ASSOCIATION IN

FILED
Mar 17, 2000 8:00 am
Secretary of State

03-17-2000 90008 017 ****61.25

Principal Place of Business Mailing Address
6301 HWY. 192 THOMAS R LONG - BOARD OF DIRECTORS
PO BOX 192 3317 S PURDUE ST
W. MELBOURNE FL 32904 MELBOURNE FL 32901-8101
US

2. Principal Place of Business 3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WHISNER, TOM
2405 NEW YORK ST.
W. MELBOURNE FL 32904

Name

Thomas R. Long

Street Address (P.O. Box Number is Not Acceptable)

3317 S. Purdue St.

City

Melbourne

FL

Zip Code
32901

8. 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 Thomas R. Long

3/9/00

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☒ Delete
NAME HAWLEY, DOUG
STREET ADDRESS 1686 TRIMBLE RD
CITY-ST-ZIP MELBOURNE FL 32901

TITLE Chris Delaney Pres. ☒ Change ☐ Addition
NAME 127 San Juan Circle
STREET ADDRESS Melbourne, Fla. 32935
CITY-ST-ZIP

TITLE V ☐ Delete
NAME FARRINGTON, KENNY
STREET ADDRESS 2215 WILCOX ST
CITY-ST-ZIP W MELBOURNE FL 32901

TITLE Kenny Farrington V.Pres. ☐ Change ☐ Addition
NAME 2215 Wilcox St
STREET ADDRESS W. Melbourne, Fla. 32904
CITY-ST-ZIP

TITLE T ☐ Delete
NAME HORSCHER, JACK
STREET ADDRESS 300 CRESENT DR
CITY-ST-ZIP MELBOURNE FL 32901

TITLE Jack Horschel. Tres. ☐ Change ☐ Addition
NAME 300 Crescent Dr.
STREET ADDRESS Melbourne, Fla. 32901
CITY-ST-ZIP

TITLE DC ☐ Delete
NAME CROWL, CLARENCE
STREET ADDRESS 380 DORSET DR
CITY-ST-ZIP W. MELBOURNE FL 32904

TITLE DC ☐ Change ☐ Addition
NAME Clarence Crowl
STREET ADDRESS 380 Dorset. Dr. W. Melb. Fla 32904
CITY-ST-ZIP

TITLE S ☒ Delete
NAME HAWLEY, SANDRA ASBURY
STREET ADDRESS 1686 TRIMBLE RD
CITY-ST-ZIP MELBOURNE FL 32901

TITLE Tina Lynn Crowl Sec. ☒ Change ☐ Addition
NAME 161 Maywood Ave NW
STREET ADDRESS Palm Bay, Fla. 32907
CITY-ST-ZIP

TITLE SAD ☒ Delete
NAME FRANCO, FRANK DE
STREET ADDRESS 1490 CARR CIR NE
CITY-ST-ZIP W MELBOURNE FL 32901

TITLE Matt Delaney SAD ☒ Change ☐ Addition
NAME 1807 S. Park Ave.
STREET ADDRESS Melbourne, Fla. 32901
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Thomas R. Long*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/9/00

Date

321-723-8004

Daytime Phone #

CR2E037 (9/99)