2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2002 8:00 am
Secretary of State
05-05-2002 90285 029 ****61.25

DOCUMENT # 707080

1. Entity Name

BREVARD COUNTY AIR AND POWER BOAT ASSOCIATION IN C.

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

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc. PO. Box 192
City & State	City & State MELBOURNE, FL.
Zip / Country	Zip 32904 / Country USA

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
LONG, THOMAS R 3317 S PURDUE ST MELBOURNE FL 32901	Name JOE HARRISON Street Address (P.O. Box Number is Not Acceptable) 3255 HIELD RD. City MELBOURNE FL Zip Code 32904

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 Joe Harrison JOE HARRISON, PRESIDENT BCA & PBA 4/15/02
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P HARRISON, JOE 3255 HIELD RD. MELBOURNE FL 32904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HENDERSON, ALBERT 7510 CRABGRASS RD. ST. CLOUD, FL. 34773	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KUHMAN, JIM 1680 WILLARD DR. PALM BAY FL 32907	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAWLEY, DOUG 1686 TRIMBLE RD. MELBOURNE, FL. 32935	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HORSCHEL, JACK 300 CRESENT DR MELBOURNE FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DELANEY, MATT 1807 S. PARK AVE. MELBOURNE, FL. 32901	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DC CROWL, CLARENCE 380 DORSET DR W. MELBOURNE FL 32904	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOSLAND, JAMIE 724 W. BONNIE CR. MELBOURNE, FL. 32901	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CROWL, TINA L 161 MAYWOOD AVE NW PALM BAY FL 32907	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V/D KUHMAN, JIM 1680 WILLARD DR. PALM BAY, FL. 32907	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SAD LARRAINE, WALT 2669 TRAMMEL AVE MELBOURNE FL 32935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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: Joe Harrison SIGNATURE PRESIDENT JOE HARRISON, PRESIDENT 4/15/02 (321) 724-5189
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #