## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 756117 (8) THE CENTRAL BREVARD ROCK AND GEM CLUB INC.										
Principal Place of Business Mailing Address										
3985 SEVIL COCOA FL US			3985 SEVILLE AVE. COCOA FL 32926							
			US			3.	Date Incorporated or Qualified 01/29/1981	3a.	Date of Las 05/01/	,
2. Principal 21	Place of Busines	SS	2a. Mailing Address	2a. Mailing Address 26			FEI Number		00/01/	Applied For
Suite, Ap	t. #, etc.		Suite, Apt. #, etc.				NOT APPLICABLE		\$9.7	Not Applicable  5 Additional
City & State			27	-		5.	Certificate of Status Desired			Pequired
23			City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	00 May Be
Zip	Zip Cour		Zip	Country	y	<del></del>	This corporation has liability fo		Add e tax under s	ed to Fees s. 199.032
24	29 urrent Registered Agent	30	30 Florida Statutes Yes X No							
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent  81 Name										
PYLES, LORETTA L.					Stron	t Addrson (D.C	D. Box Number is Not Accepta	ever.		
335 JACALA DR				B2	1_	R Address (F.C	D. Box Number is Not Accepta	Dłe)		
MERRITT ISLAND FL 32953									<del></del>	
				84	City				85 Z	ip Code
11. Pursuant	t to the provision	s of Sections 617.	0502 and 617.1508, Florida Statute Florida. Such change was authoriz	es, the above-	named o	corporation su	bmits this statement for the or	mose of		rogistared office
familiar v	ered agent, or bi vith, and accept	oth, in the State of the obligations of,	Florida. Such change was authorize Section 617.0503, Florida Statutes	ed by the corp	oration's	s board of dire	ectors. I hereby accept the app	pose or	as registered	d agent. I am
SIGNATURE	71									
12.	Signature, typeo or p	agent and title if applicable. (NO SAND DIRECTORS	OTE: Registered Agent signature required who 13.				DATE			
TITLE	P		DELETE	1.1 TITLE		<u> P</u>	ADDITIONS/CHANGES TO OF	FICERS A	ND DIRECTO	
NAME	ALBERT, J	<b>JEAN</b>		1,*		1 *	, Lowell		[_] Change	Addition
STREET ADDRESS		n river dr.					Sea Goll Dri	ے م		
CITY-ST-ZIP	COCOA F	L				•		2196	•	-
TITLE NAME	V		DELETE	2.1 TITLE					☐ Change	Addition
STREET ADDRESS	LIGON, BI			2.2 NAME						
CITY-ST-ZIP	MERRITT I			23 STREET						
TITLE	S	VENTO I E	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		S			☐ Change	Addition
NAME	HARRISON	i, Liza	<b>/</b>	3.2 NAME		Falson	hvey a		Cuante	Manifoli
STREET ADDRESS	425 FIRST			3.3 STREET ADDRESS 1		1115	Samar Road			- 1
CITY-ST-ZIP TITLE	MERRITT I	SLAND FL		3.4. CITY-ST-ZIP C		Cocon	Beach, FL :	3293	ì	
NAME	T DEMINISER	LINDA	DELETE	4.1 TITLE			7		Change	☐ Addition
STREET ADDRESS	RENINGER 3985 SEVI			4. 2 NAME						İ
CITY-ST-ZIP	COCOA FI			4.3 STREET						Ī
TITLE	D		DELETE	4.4 CITY-S' 5.1 TITLE	I-ZIP	<del> </del>			Change	Addition
NAME	MORGAN,			5.2 NAME					The country	
STREET ADDRESS	68 RIVERV			5.3 STREET	ADDRESS					
CITY-ST-ZIP	COCOA BO	CH FL		5.4 CITY - ST	-ZIP					,
TITLE NAME	D BDUAUGRI	DANI	DELETE	6.1 TITLE		4	0 10		Change	Addition
STREET ADDRESS	BROZOSKI 6795 RIVER			62 NAME		Carole	Boyle Hedgecock C lite Beach, F			
CITY-ST-ZIP	TITUSVILLE			6.3 STREET	NUDRESS	240	Hedge cock C	<b></b>	<b>D</b> - 6 · •	
14. Ldo bereb	w certify that the	information cupplic	ed with this filing is voluntarily furnis	6.4 CITY ST hed and does	not qua	alify for the exe	emption stated in Section 119		<u>3⊋937</u> Iorida Statuti	
oath; that appears in	Lam an officer of Block 12 or Bk	indicated on this a or director of the co ock 13 if changed	nnual report or supplemental annual report of supplemental annual report or the receiver or trustee or on an attachment with an address or on the supplemental and the supplemental and the supplemental attachment with a supplemental and the supplemental attachmental and the supplemental attachmental	ai report is true empowered to	e and ac	curate and that the second the second the second the second terms and the second terms are second to the second terms are	at my signature shall have the is required by Chapter 617, Fk	same lega orida Statu	al effect as if utes; and tha	made under

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIG

Linda Rening

405 96 Dete 407-632-1771