ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90386 009 ****61.25

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1. Entity Name
SOUTH BREVARD ARE INTER-FAITH SPONSORING COMMITTEE, INC.

Principal Place of Business	Mailing Address
C/O HOLY NAME OF JESUS CATHOLIC CHURCH 3050 N HWY A1A INDIALANTIC, FL 32903	C/O HOLY NAME OF JESUS CATHOLIC CHURCH 3050 N HWY A1A INDIALANTIC, FL 32903

04222004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
2950 N, Harbor City Blvd.	2950 N. Harbor City Blvd
Suite, Apt. #, etc.	Suite, Apt. #, etc. 2950
City & State: Melbourne, FL	City & State: Melbourne, FL
Zip: 32935 Country: Brevard	Zip: 32935 Country: Brevard

4. FEI Number 59-3670512 ☐ 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
ROCHE, PATRICK F FRESE, NASH & HANSEN, P.A. 930 S HARBOR CITY BLVD, SUITE 505 MELBOURNE, FL 32901	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD PAGE, DAVID REV 3050 N. A1A INDIALANTIC, FL 32903	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD RILEY, HARVEY REV 2295 ADAMS ST. NE PALM BAY, FL 32905	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Riley, Harvey Rev. 2295 Adams St. NE Palm Bay, FL 32905 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ANDERSON, REV. ~~B.H.W.M.~~ 684 N. HARBOR CITY BLVD. MELBOURNE, FL 32935	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~PD~~ Anderson, Rev. ~~B.H.W.M.~~ 684 N. Harbor City Blvd. Melbourne, FL 32935 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD VANCE, REV. MARC 50 W. STRAWBRIDGE AVE. MELBOURNE, FL 32901	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VD~~ Michael McElwee 2950 N. Harbor City Blvd. Melbourne, FL 32935 ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Heffner, Rpbert, Rev. 5310 Babcock St. NE, Palm Bay, FL 32905 ☐ Change ☒ Addition

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: William M. Anderson 4/27/04 (321)254-9163
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #