

FILED

Jan 18, 2007 8:00 am  
Secretary of State

01-18-2007 90091 006 \*\*\*\*61.25

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

DOCUMENT # N01000003659

1. Entity Name  
BREVARD FLAG FOOTBALL, INC.



Principal Place of Business  
3960 S. BANANA RIVER BLVD  
COCOA BEACH, FL 32931

Mailing Address  
3960 S. BANANA RIVER BLVD  
COCOA BEACH, FL 32931

**DO NOT WRITE IN THIS SPACE**



01052007 No Chg-NP CR2E037 (4/06)

4. FEI Number  
59-3720321

Applied For  
Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

DOUGHERTY, DENNIS  
2370 PALM LAKE DRIVE  
MERRITT ISLAND, FL 32952

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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, 2007**

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

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME KENDIG, JAMES  
STREET ADDRESS 1550 SOUTH TROPICAL TRAIL  
CITY-ST-ZIP MERRITT ISLAND, FL 32952

TITLE SD  
NAME RYNYAN, DEANNA *Delete*  
STREET ADDRESS 3960 SOUTH BANANA RIVER BLVD  
CITY-ST-ZIP COCOA BEACH, FL 32931

TITLE ~~SD~~  
NAME ~~RYNYAN~~, GARY *Runyan*  
STREET ADDRESS 3960 SOUTH BANANA RIVER BLVD  
CITY-ST-ZIP COCOA BEACH, FL 32931

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: *Doug Runyan* *Gary Runyan* 1-11-07 321-784-4515  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #