

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 19, 2002 8:00 am
Secretary of State

0067786

03-19-2002 90005 020 ****61.25

DOCUMENT # N10367

1. Entity Name

FRIENDS OF CHILDREN OF BREVARD COUNTY, INC.

Principal Place of Business

Mailing Address

**MOORE JUSTICE CENTER
 GAL OFFICE 2825 JUDGE
 VIERA FL 32940
 US**

**2910 AVON LANE
 TITUSVILLE FL 32719
 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

59-3175485

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**BOELKE, JOHN W
 2910 AVON LANE
 TITUSVILLE FL 32746**

32796

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.

SIGNATURE

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: PD
 NAME: CIANFROGNA, LOUIS V
 STREET ADDRESS: 815 S WASHINGTON ST
 CITY-ST-ZIP: TITUSVILLE FL 32796 Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: STD
 NAME: BOELKE, JOHN
 STREET ADDRESS: 2910 AVON LANE
 CITY-ST-ZIP: TITUSVILLE FL 32796 Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: VD
 NAME: ROBERTS, MARY
 STREET ADDRESS: 772 APACHE CT
 CITY-ST-ZIP: TITUSVILLE FL 32760 Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: D
 NAME: DIXON, YVONNE B
 STREET ADDRESS: 3260 BARBARA LANE
 CITY-ST-ZIP: TITUSVILLE FL 32796 Delete

TITLE: Change Addition
 NAME: Change Addition
 STREET ADDRESS: Change Addition
 CITY-ST-ZIP: Change Addition

TITLE: Delete
 NAME: Reuter, Robert
 STREET ADDRESS: 1468 Wellington Cir
 CITY-ST-ZIP: Rockledge FL Delete

TITLE: Change Addition
 NAME: Robert Reuter
 STREET ADDRESS: 1468 Wellington Cir
 CITY-ST-ZIP: Rockledge FL 32955

TITLE: Delete
 NAME: Delete
 STREET ADDRESS: Delete
 CITY-ST-ZIP: Delete

TITLE: Change Addition
 NAME: Ruth Santomassino
 STREET ADDRESS: 372 Berkeley St
 CITY-ST-ZIP: Satellite Beach FL 32937

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John W. Boelke

Date

Daytime Phone #

3-4-02 321-861-3661

CR2E037 (9/01)