

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18171

1. Entity Name

SPACE COAST MUSTANG CLUB, INC.

FILED
Mar 03, 2000 8:00 am
Secretary of State

03-03-2000 90246 021 ****61.25

Principal Place of Business

Mailing Address

P O BOX 867
COCOA FL 32923

P O BOX 867
COCOA FL 32923-0867

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3092439

Applied For

Not Applicable

Zip

Country

Zip

Country

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

MCAVEY, JOHN
3437 JAY TEE DR
MELBOURNE FL 32901

Name

Reddick, Resa

Street Address (P.O. Box Number is Not Acceptable)

625 Jackson Ct.

City

Satellite Beach

FL

Zip Code

32937

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

Rosa Reddick

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

2-22-00

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	T	☒ Delete
NAME	ELLIOTT, CHARLES	
STREET ADDRESS	1555 VEGA AVE	
CITY-ST-ZIP	MERRITT ISLAND FL 32953	
TITLE	D	☒ Delete
NAME	JONES, STEWART	
STREET ADDRESS	880 HAWAII AVE NW	
CITY-ST-ZIP	PALM BAY FL 32907	
TITLE	OV	☐ Delete
NAME	HEBER, CONNIE	
STREET ADDRESS	508 TEAL DR	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	S	☒ Delete
NAME	REDDICK, RESA	
STREET ADDRESS	625 JACKSON CT	
CITY-ST-ZIP	SATELLITE BCH FL 32937	
TITLE	P	☒ Delete
NAME	MCAVEY, JOHN	
STREET ADDRESS	3437 JAY TEE DRIVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	☒ Delete
NAME	GRIFFIN, ARTHUR	
STREET ADDRESS	2556 SELLES LN	
CITY-ST-ZIP	MELBOURNE FL	

TITLE	Treasurer	☒ Change ☐ Addition
NAME	MCAVEY, Marcia	
STREET ADDRESS	3437 Jay Tee Dr.	
CITY-ST-ZIP	Melbourne, FL 32901	
TITLE	D	☒ Change ☐ Addition
NAME	TURNER, DAVED	
STREET ADDRESS	110 MIDWAY CT	
CITY-ST-ZIP	SEBASTIAN, FL 32958	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	S	☒ Change ☐ Addition
NAME	Menke Jr, Jim	
STREET ADDRESS	2605 Aston Circle	
CITY-ST-ZIP	Melbourne, FL 32940	
TITLE	President	☒ Change ☐ Addition
NAME	Reddick, Resa	
STREET ADDRESS	625 JACKSON CT	
CITY-ST-ZIP	Satellite Beach, FL 32937	
TITLE	D	☒ Change ☐ Addition
NAME	MCAVEY, John	
STREET ADDRESS	3437 JAY TEE DR.	
CITY-ST-ZIP	Melbourne, FL 32901	

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Marcia A. Mcavey

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

2-13-00

Daytime Phone #

(321) 723-1486

CR2E037 (9/99)