

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2006 8:00 am
Secretary of State

01-27-2006 90038 010 ****61.25

DOCUMENT # N27948 1. Entity Name THE BREVARD COUNTY BRIDAL ASSOCIATION, INC.					
Principal Place of Business BREVARD COUNTY BRIDAL ASSOCIATION P. O. BOX 2024 MELBOURNE, FL 32902 US			Mailing Address BREVARD COUNTY BRIDAL ASSOCIATION P. O. BOX 2024 MELBOURNE, FL 32902 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 36-1360795 ☐ 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		
KAHN, JAMES 1711 SKYLINE LANE SEBASTIAN, FL 32958			Name JAMES, DAVID Street Address (P.O. Box Number is Not Acceptable) 106 DUDLEY DR City ROCKLEDGE FL 32955		
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 <i>David James</i> DAVID JAMES (TREASURER) 1/25/06 *Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when reinstating) DATE					
Filing Fee is \$61.25 Due by May 1, 2006		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	DP SOMMER, ANDREW B 1110 HOLLOW BROOK LANE MALABAR, FL 32950 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DV KOTYS, KANDY 1600 WOODLAND, UNIT 109 ROCKLEDGE, FL 32955 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP ☒ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT JAMES, DAVID P.O. BOX 2056 COCOA BEACH, FL 32923 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS TORCHIA, FRAN 1485 POLARIS ST. MERRITT ISLAND, FL 32953 ☐ 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	DV GREGORY S. KIMPLE ☐ Change ☒ Addition 148 JUNE DR COCOA BEACH, FL 32931		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition		
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 <i>David James</i> DAVID JAMES 1/25/06 321-636-5747 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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