## 2002 UN!FORM BUSINESS REPORT (UBR) FILED May 06, 2002 8:00 am Secretary of State **DOCUMENT # 759597** 1. Entity Name KEEP BREVARD BEAUTIFUL, INC. 05-06-2002 90022 002 \*\*\*\*61.25 Principal Place of Business Mailing Address 40 FORTENBERRY RD. 40 FORTENBERRY RD. MERRITT ISLAND FL 32952 MERRITT ISLAND FL 32952 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2154072 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ELLIS, STEVE Street Address (P.O. Box Number is Not Acceptable) 535 DELANNOY AVE COCOA FL 32922 City 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. (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Added to Fees **Department of State** OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE ☐ Delete TITLE ☐ Addition CR2E037 (9/01) ☐ Change WEBER, LARRY S NAME NAME STREET ADDRESS 40 Fortenberry RD. STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32952 ۷D ☐ Delete TITLE CD Change ☐ Addition SMIRL, LAURIE NAME STREET ADDRESS 701 W COCOA BEACH CSWY STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL 32936 Dêtete. TITI F - 🖃 Change ---- 😾 Addition -DALEY, TIM PORTER, JOHN NAME STREET ADDRESS 226 N. ATLANTIC AVE. STREET ADDRESS CITY-ST-7IP COCOA BEACH FL 32931 CITY-ST-7IP JUIND FL 32952 TD Delete TITLE TITLE Change Addition BECK, KATHY NAME NAME STREET ADDRESS 1901 S. HARBOR CITY BLVD. STREET ADDRESS CITY-ST-ZIP MELBOURNE FL CITY-ST-ZIP Delete TITLE ☐ Change Addition RICHARD DINGESS 1135 S. WASHINGTON SIEB **ELLIS, STEVE** NAME NAME STREET ADDRESS 535 DELANNOY AVE STREET ADDRESS CITY-ST-ZIP COCOA FL 32922 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition MCMASTER, SHERRY NAME NAME STREET ADDRESS 335 ARETMIS BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953

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 impowered.

SIGNATURE

SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING OFFICER OF DIRECTOR

321-453-8767

Daytime Phone #