2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2007 08:00 AM
Secretary of State

DOCUMENT # 765458

1. Entity Name
THE SOUTH BREVARD COIN CLUB, INC.

Principal Place of Business	Mailing Address
3721 DRIFTWOOD DR. MELBOURNE, FL 32935	3721 DRIFTWOOD DR. MELBOURNE, FL 32935

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07082007 No Chg-NP CR2E037 (4/06)

4. FEI Number
52-1779525
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

BUTZ, BRIGHT
425 PATRICK AVENUE
MERRITT ISLAND, FL 32953

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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 Bright Butz 7/8/07
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 September 14, 2007

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

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	WILSON, ALYSHA
STREET ADDRESS	3721 DRIFTWOOD DR
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	CD
NAME	CARPENTER, RICHARD
STREET ADDRESS	1045 LA PALOMA DRIVE
CITY-ST-ZIP	ROCKLEDGE, FL 32955
TITLE	T
NAME	SWENSON, DAVID E
STREET ADDRESS	150 BILLIAR AVE NE
CITY-ST-ZIP	PALM BAY, FL 32907
TITLE	V
NAME	MUTZ, EDWARD
STREET ADDRESS	1897 NICKLAUS DRIVE
CITY-ST-ZIP	MELBOURNE, FL 32935
TITLE	S
NAME	RAGUE, BONNIE
STREET ADDRESS	2099 TEWLVE OAKS DR SE
CITY-ST-ZIP	PALM BAY, FL 32909
TITLE	D
NAME	BERNARD, LEN
STREET ADDRESS	7585 AGAWAM ROAD
CITY-ST-ZIP	MICCO, FL 32976

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07/11/07-80004-007 61.25

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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: [signature] 7-8-07 321-751-3647
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #