

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008 8:00 am
Secretary of State

04-11-2008 90033 002 ****61.25

DOCUMENT # 765458 1. Entity Name THE SOUTH BREVARD COIN CLUB, INC.			
Principal Place of Business 3721 DRIFTWOOD DR. MELBOURNE, FL 32935		Mailing Address 3721 DRIFTWOOD DR. MELBOURNE, FL 32935	
2. Principal Place of Business - No P.O. Box # 1801 PORT MALABAR BLVD NE		3. Mailing Address 2099 TWELVE OAKS DR SE	
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 	
City & State PALM BAY FL		City & State PALM BAY FL	
Zip 32905		Zip 32909	
Country USA		Country USA	
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		7. Name and Address of New Registered Agent 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)			
Filing Fee is \$61.25 Due by May 1, 2008		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 P NAME WILSON, ALYSHA STREET ADDRESS 3721 DRIFTWOOD DR CITY-ST-ZIP MELBOURNE, FL 32935	☒ Delete	TITLE P15 NAME BONNIE RAGUE STREET ADDRESS 2099 TWELVE OAKS DR SE CITY-ST-ZIP PALM BAY FL 32909	☐ Change ☒ Addition
TITLE CD #3 NAME CARPENTER, RICHARD STREET ADDRESS 1045 LA PALOMA DRIVE CITY-ST-ZIP ROCKLEDGE, FL 32955	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE T NAME SWENSON, DAVID E STREET ADDRESS 150 BILLIAR AVE NE CITY-ST-ZIP PALM BAY, FL 32907	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE V NAME MUTZ, EDWARD STREET ADDRESS 1897 NICKLAUS DRIVE CITY-ST-ZIP MELBOURNE, FL 32935	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE S NAME RAGUE, BONNIE STREET ADDRESS 2099 TEWLVE OAKS DR SE CITY-ST-ZIP PALM BAY, FL 32909	☒ Delete	TITLE D#1 (NEW) NAME RICHARD AHQUIST STREET ADDRESS 2730 S. HWY 9A1A BOX #63 CITY-ST-ZIP MELBOURNE BEACH FL 32951	☐ Change ☒ Addition
TITLE D NAME BERNARD, LEN STREET ADDRESS 7585 AGAWAM ROAD CITY-ST-ZIP MICCO, FL 32976	☒ Delete	TITLE D#2 (NEW) NAME GERRY BUTZ STREET ADDRESS 130 DECORORE ROAD SE CITY-ST-ZIP PALM BAY FL 32909	☐ 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>Bonnie B. Rague</i> BONNIE B. RAGUE		APR 17, 2008 321-837-0158	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	