

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 765458

**Entity Name:** THE SOUTH BREVARD COIN CLUB, INC.**Current Principal Place of Business:**1089 SOUTH PATRICK DRIVE  
SATELLITE BEACH, FL 32937**Current Mailing Address:**P.O. BOX 372061  
SATELLITE BEACH, FL 32937 US**FEI Number:** 52-1779525**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARKER, TIMOTHY E  
746 SEA PALM COURT  
SATELLITE BEACH, FL 32937 US*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:** TIMOTHY E BARKER

03/14/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BARKER, TIM  
Address 746 SEA PALM CT  
City-State-Zip: SATELLITE BEACH FL 32937

Title TREASURER  
Name JANECKE, TIM  
Address 2145 GOLF ISLE DRIVE #1223  
City-State-Zip: MELBOURNE FL 32935

Title CHAIRMAN  
Name LEVINSON, STANLEY  
Address 902 CASTLE PINES CT.  
City-State-Zip: MELBOURNE FL 32940

Title DIRECTOR  
Name STEWART, HAROLD  
Address 3125 CEDAR BAY DR.  
City-State-Zip: MELBOURNE FL 32934

Title SECRETARY  
Name LANE, JOHN  
Address 5572 BEACH ELDER WAY  
City-State-Zip: MELBOURNE BEACH FL 32951

Title PRESIDENT  
Name LEVINSON, STANLEY  
Address 902 CASTLE PINES CT.  
City-State-Zip: MELBOURNE FL 32940

Title VP  
Name CONNERS, JOE  
Address 2153 WOODFIELD CIRCLE  
City-State-Zip: WEST MELBOURNE FL 32904

Title DIRECTOR  
Name MELLOR, BOB  
Address 500 CRYSTAL LAKE DR.  
City-State-Zip: MELBOURNE FL 32940

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY E BARKER

DIRECTOR

03/14/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title                 DIRECTOR  
Name                DUPREY, MARTIN  
Address             4088 SNOWY EGRET DR  
City-State-Zip:    MELBOURNE FL 32904

Title                 AUTHORIZED REPRESENTATIVE  
Name                BARKER, TIMOTHY E  
Address             746 SEA PALM COURT  
City-State-Zip:    SATELLITE BEACH FL 32937