

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 222777

FILED
Apr 27, 2005
Secretary of State

Entity Name: BREVARD ENGINEERING CO.

Current Principal Place of Business:

8680 N. ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1630
8680 N. ATLANTIC AVE
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

FEI Number: 59-0939510 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

STOTTLER JR, RICHARD H
8680 N ATLANTIC AVENUE
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STOTTLER JR, RICHARD, H
Address: 8680 N ATLANTIC AVE
City-St-Zip: CAPE CANAVERAL, FL

Title: SVPD (X) Delete
Name: KAZMIERCZAK, EUGENE J
Address: 8680 N ATLANTIC AVE
City-St-Zip: CAPE CANAVERAL, FL

Title: SVPD () Delete
Name: PEKAR, JOHN A.,
Address: 8680 N ATLANTIC AVE
City-St-Zip: CAPE CANAVERAL, FL

Title: STD () Delete
Name: DEEVERS, JUDITH,
Address: 8680 N ATLANTIC AVE
City-St-Zip: CAPE CANAVERAL, FL

Title: SVPD () Delete
Name: CAMPANINI, BINO
Address: 8680 N ATLANTIC AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD H STOTTLER JR

PD

04/27/2005

Electronic Signature of Signing Officer or Director

_____ Date