

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708012

FILED
Jan 22, 2009
Secretary of State

Entity Name: THE GREATER CANAVERAL CHAPTER OF SPEBSQSA, INC.

Current Principal Place of Business:

4293 CROOKED MILE RD
MERRITT ISLAND, FL 32952 US

New Principal Place of Business:

Current Mailing Address:

4293 CROOKED MILE RD
MERRITT ISLAND, FL 32952 US

New Mailing Address:

FEI Number: 59-6194122 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

BUBBERS, WILLIAM C TREASUR
4293 CROOKED MILE RD
MERRITT ISLAND, FL 32952 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

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BUBBERS, WILLIAM C TREAS
Address: 4293 CROOKED MILE RD.
City-St-Zip: MERRITT ISLAND, FL 32952

Title: PD () Delete
Name: HANRAHAN, TIMOTHY PRES
Address: 215 HEDGE COCK CT.
City-St-Zip: SATELLITE BEACH,, FL 32937

Title: VPD () Delete
Name: ROPP, ARLAN VP D
Address: 7455 DARIAN ROAD
City-St-Zip: PORT ST. JOHN, FL 32927

Title: VPD () Delete
Name: HARRIS, RAYMOND VP D
Address: 3060 N. ATLANTIC AVE. #712
City-St-Zip: COCOA BEACH, FL 32931

Title: VPD () Delete
Name: RICKER, RICHARD VPD
Address: 898 BEAVERDALE LANE
City-St-Zip: ROCKLEDGE, FL 32955

Title: SD () Delete
Name: ROSS, WILLIAM E SEC
Address: 139 W. SUWANNEE LN.
City-St-Zip: COCOA BEACH, FL 32931

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: VPD (X) Change () Addition
Name: STORMS, JAMES VP D
Address: 3028 THRUSH DRIVE
City-St-Zip: MELBOURNE, FL 32935

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 exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: WILLIAM C. BUBBERS

TREA

01/22/2009

Electronic Signature of Signing Officer or Director

Date