

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2004 8:00 am
Secretary of State

04-14-2004 90020 008 ****61.25

DOCUMENT # 712332

1. Entity Name
SPACEPORT R/CERS, INCORPORATED



Principal Place of Business
P.O. BOX 931
COCOA, FL 32923-0931 US

Mailing Address
P.O. BOX 931
COCOA, FL 32923-0931 US

54032893



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04082004 Chg-NP CR2E037 (10/03)

City & State

City & State

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EHRHARDT, JR., ROBERT
3710 WINDSOR DR.
COCOA, FL 32926

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)

DATE

Filing Fee is \$61.25
Due by May 1, 2004

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
WELCOME, GEORGE ☒ Delete
4400 FLOOD ST.
PORT SAINT JOHN, FL 32927

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CZENTHE, TOM ☐ Delete
4845 MIRAMAR ST.
COCOA, FL 32927

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
STD
EHRHARDT, JR, ROBERT ☐ Delete
3710 WINDSOR DRIVE
COCOA, FL 32926

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
D
CUTRONE, DIXIE ☐ Delete
1325 N TROPICAL TRL
MERRITT ISLAND, FL 32953

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
KANE, JOSEPH ☐ Delete
1390 MERCURY STREET
MERRITT ISLAND, FL 32953

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
VD
MACIAG, TED ☒ Change ☐ Addition
PO BOX 18
SHARPE, FL 32959

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Robert E. Ehrhardt Jr.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/14/04
Date

321-639-6353
Daytime Phone #