

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 717131

1. Entity Name

THE BREVARD MUSEUM, INC.

Principal Place of Business

2201 MICHIGAN AVE  
C/O ANN L LAWTON  
COCOA FL 32926  
US

Mailing Address

2201 MICHIGAN AVE  
C/O ANN L LAWTON  
COCOA FL 32926-5618  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7112336

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LAWTON, ANN L  
2201 MICHIGAN AVE.  
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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:

FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	S	<input type="checkbox"/> Delete
NAME	MOEHLE, DOTTIE	
STREET ADDRESS	2704 INDIAN RIVER DRIVE	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	T	<input type="checkbox"/> Delete
NAME	KUNS, MERLE L DR.	
STREET ADDRESS	3605 S. BANANA RIVER BLVD., #301	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	P	<input type="checkbox"/> Delete
NAME	ROE, GEORGE W	
STREET ADDRESS	995 KINGS POST ROAD	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	VINING, JOHN	
STREET ADDRESS	1837 LONGLEAF ROAD	
CITY-ST-ZIP	COCOA FL 32926	
TITLE	D	<input type="checkbox"/> Delete
NAME	LAWTON, ANN L	
STREET ADDRESS	14 WILLOW GREEN DRIVE	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE	VP	<input type="checkbox"/> Delete
NAME	TUCCARONE, JENNIFER	
STREET ADDRESS	2403 WEST FRIDAY ROAD	
CITY-ST-ZIP	COCOA FL	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	T	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RADLOFF, CHARLES	
STREET ADDRESS	1217 THREE MEADOWS DRIVE	
CITY-ST-ZIP	ROCKLEDGE, FL 32955	
TITLE	M	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	V	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/05/00

Date

321/632-1830

Daytime Phone #

CR2E037 (9/99)

717131

Attachment  
00063268

P  
KENNETH CROOKS  
7380 MURRELL RD. S-100  
MELBOURNE, FL 32940

D  
BILLIE BARTON AKER  
1455 ECHO CIRCLE  
TITUSVILLE, FL 32780

D  
HEP ALDRIDGE  
450 N. BURNETT RD  
COCOA, FL 32926

D  
CHRIS DELOREY  
8225 NORTH WICKHAM  
MELBOURNE, FL 32940

D  
MARY DOWTY  
6229 JANIA RD  
COCOA, FL 32927

D  
CHARLES HAMPTON  
1440 SOUTH HARBOR DR  
MERRITT IS., FL 32952

D  
PAT MASTROPAOLO  
104 RIVERSIDE DR #406  
COCOA, FL 32922

D  
BARBARA MENYHART  
1790 BAYSHORE DR.  
COCOA BEACH, FL 32931

D  
EDWARD J. O'DONNELL  
3550 TRAVIS PLACE  
TITUSVILLE, FL 32780

D  
DIANE SMITH  
479 NAISH AVE  
COCOA BEACH, FL 32931