

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 718039 (1)

1. Corporation Name

SPACE COAST LEAGUE OF CITIES, INC.



Principal Place of Business

Mailing Address

P. O. BOX 560488  
ROCKLEDGE FL 32956-0488  
US

P. O. BOX 560488  
ROCKLEDGE FL 32956-0488  
US

3. Date Incorporated or Qualified  
02/06/1970

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
59-2921880

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

KAPUSHY, EDWARD  
1222 SEMINOLE DR.  
INDIAN HARBOUR BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name

BARTLEY, LARRY

82 Street Address (P.O. Box Number is Not Acceptable)

P.O. Box 2806

N/A

83

555 S. WASHINGTON AVE.

84 City

TITUSVILLE

FL

85

Zip Code

32781-2806

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Larry Bartley

LARRY BARTLEY

3/11/96

12. OFFICERS AND DIRECTORS

1. TITLE

PD

DELETE

2. NAME

BUCKLEY, JOHN

3. STREET ADDRESS

1670 CARDINAL CT.

4. CITY-STATE-ZIP

MELBOURNE FL

1. TITLE

VPD

DELETE

2. NAME

RANDELS, ROCKY

3. STREET ADDRESS

308 EAST CENTRAL BLVD.

4. CITY-STATE-ZIP

CAPE CANAVERAL FL

1. TITLE

TD

DELETE

2. NAME

KAPUSHY, EDWARD

3. STREET ADDRESS

1222 SEMINOLE FR.

4. CITY-STATE-ZIP

INDIAN HARBOUR BEACH FL 32937

1. TITLE

SD

DELETE

2. NAME

GOTT, LORRAINE

3. STREET ADDRESS

510 CINNAMON DR

4. CITY-STATE-ZIP

SATELLITE BEACH FL

1. TITLE

NAME

DELETE

2. STREET ADDRESS

3. CITY-STATE-ZIP

1. TITLE

NAME

DELETE

2. STREET ADDRESS

3. CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE

PRESIDENT PD

Change Addition

2. NAME

RANDELS, ROCKY

3. STREET ADDRESS

308 EAST CENTRAL BLVD.

4. CITY-STATE-ZIP

CAPE CANAVERAL, FL 32920

1. TITLE

VPRESIDENT VPD

Change Addition

2. NAME

GOTT, LORRAINE

3. STREET ADDRESS

565 CASSIA BLVD

4. CITY-STATE-ZIP

SATELLITE BEACH, FL 32937

1. TITLE

TREASURER TD

Change Addition

2. NAME

BARTLEY, LARRY

3. STREET ADDRESS

P.O. Box 2806 N/A

4. CITY-STATE-ZIP

TITUSVILLE, FL 32781-2806

1. TITLE

SECRETARY SD

Change Addition

2. NAME

BLUBAUGH, JOHN

3. STREET ADDRESS

2241 Westminister Dr.

4. CITY-STATE-ZIP

CoCoA, FL 32903-1722 32906

5. TITLE

500001764135

Change Addition

6. NAME

-04/01/96--01025--006

7. STREET ADDRESS

\*\*\*\$1.25

8. CITY-STATE-ZIP

Change Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Larry Bartley

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LARRY BARTLEY

3/11/96

(407)853-8464

SG 3-30-96

CR2E037 (12/95)