

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 718039

1. Entity Name

SPACE COAST LEAGUE OF CITIES, INC.

FILED
Mar 22, 2000 8:00 am
Secretary of State

03-22-2000 90055 016 ****61.25

Principal Place of Business

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

Mailing Address

P. O. BOX 560488
ROCKLEDGE FL 32956-0488
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

59-2921880

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

PATRICIA POOLE
805 E PALMETTO AVE
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

Name

BRADFORD BETTEN

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

507 OCEAN AVENUE

MELBOURNE BEACH

City

FL

Zip Code

32951

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

BRADFORD BETTEN

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

(NOTE: Registered Agent Signature required when reinstating)

2/14/2000

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

TITLE PD ☒ Delete
NAME PETSOS, ARTHUR
STREET ADDRESS 105 POLK AVENUE
CITY-ST-ZIP CAPE CANAVERAL FL 32920

TITLE TD ☒ Delete
NAME HALL, WILLIAM
STREET ADDRESS 2725 MALABAR RD
CITY-ST-ZIP MALABAR FL 32950

TITLE VPD ☒ Delete
NAME POOLE, PATRICIA
STREET ADDRESS 805 E PALMETTO AVE
CITY-ST-ZIP MELBOURNE FL 32901

TITLE DS ☒ Delete
NAME PARKER, JULIA
STREET ADDRESS 555 HAMMOCK RD
CITY-ST-ZIP MELBOURNE VILLAGE FL 32904

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME POOLE, PATRICIA
STREET ADDRESS 805 E. PALMETTO AVE
CITY-ST-ZIP MELBOURNE, FL 32901

TITLE TR ☒ Change ☐ Addition
NAME BRADFORD BETTEN
STREET ADDRESS 507 OCEAN AVENUE
CITY-ST-ZIP MELBOURNE BEACH, FL 32951

TITLE VPD ☒ Change ☐ Addition
NAME JULIA PARKER
STREET ADDRESS 555 HAMMOCK ROAD
CITY-ST-ZIP MELBOURNE VILLAGE, FL 32904

TITLE DS ☐ Change ☐ Addition
NAME WILLIAM HALL
STREET ADDRESS 2725 MALABAR RD
CITY-ST-ZIP MALABAR, FL 32950

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

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

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:

BRADFORD BETTEN

2/14/2000

(321) 727-5860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)