

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720643

FILED  
Feb 28, 2005  
Secretary of State

Entity Name: SOUTH BREVARD FLOTILLA 42, INC.

## Current Principal Place of Business:

327 ARCADIA CT  
MELBOURNE, FL 32901

## New Principal Place of Business:

## Current Mailing Address:

327 ARCADIA CT  
MELBOURNE, FL 32901

## New Mailing Address:

FEI Number: 59-1966942

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARTINEZ, SALVADOR F  
327 ARCADIA CT  
MELBOURNE, FL 32901 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: VPD ( ) Delete  
Name: MCGUINNESS, JAMES H  
Address: 2724 MARIAH DR  
City-St-Zip: MELBOURNE, FL 32940

Title: D ( ) Delete  
Name: PETERSON, PETER C  
Address: 401 THIRD AVENUE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: STM ( ) Delete  
Name: MARTINEZ, SALVADOR F  
Address: 327 ARCADIA CT.  
City-St-Zip: MELBOURNE, FL 32901

Title: PD ( ) Delete  
Name: MILLER, WILLIAM V  
Address: 434 DOVE LANE  
City-St-Zip: SATELLITE BEACH, FL 32937

Title: D ( ) Delete  
Name: FREITAS, DANIEL REV  
Address: 4905 BUTTONWOOD DRIVE  
City-St-Zip: MELBOURNE, FL 32940

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: MCGUINNESS, JAMES H  
Address: 2724 MARIAH DR  
City-St-Zip: MELBOURNE, FL 32940

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: MOQUIN, JULES H  
Address: 2641 VERMONT STREET  
City-St-Zip: MELBOURNE, FL 32904

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SALVADOR F MARTINEZ

STM

02/28/2005

Electronic Signature of Signing Officer or Director

Date