

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 721986

1. Entity Name

GREATER WEST MELBOURNE ATHLETIC ASSOCIATION, INC.



FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

08 SEP 22 AM 11:44



Principal Place of Business

3000 MINTON RD  
W. MELBOURNE FL 32904  
US

Mailing Address

P.O. BOX 120272  
W. MELBOURNE FL 32912-0272  
US

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

P.O. Box 120740

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

23-7206518

Applied For

Not Applicable

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

THOMPSON, C. DWAYNE  
2475 TURTLE MOUND ROAD  
MELBOURNE FL 32935

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

*C. Dwayne Thompson*

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

(NOTE: Registered Agent signature required when reinstating)

DATE

600136349066  
09/25/08--01059--014 \*\*61.25

FILE NOW: FEE IS \$61.25  
Due By May 1, 2008

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 PD  
NAME THOMPSON, C. DWAYNE ☐ Delete  
STREET ADDRESS 2475 TURTLEMOND RD  
CITY-ST-ZIP MELBOURNE FL 32935

TITLE VPD  
NAME PENNELLA, JOHN M ☒ Delete  
STREET ADDRESS 1364 MT CT  
CITY-ST-ZIP PALM BAY FL 32907

TITLE TD  
NAME REED, KIMBERLY J ☐ Delete  
STREET ADDRESS 1326 PAKENHAM ST NW  
CITY-ST-ZIP PALM BAY FL 32907

TITLE SD  
NAME STRAUS, JULIE T ☐ Delete  
STREET ADDRESS 3050 OHIO ST  
CITY-ST-ZIP MELBOURNE 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 ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE VPD  
NAME Alfred J. Munson III ☐ Change ☒ Addition  
STREET ADDRESS 1789 Pinewood Rd  
CITY-ST-ZIP Melbourne FL 32934

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

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

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 exemptions contained in Section 119, 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, and all other like empowered.

SIGNATURE:

*C. Dwayne Thompson*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6-08

Date

Daytime Phone #