

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **723286** (1)

1. Corporation Name

**THE SOCIETY OF FORTY MEN AND EIGHT HORSES BREVAR
D COUNTY, FLORIDA, POST 954, INC.**



Principal Place of Business

Mailing Address

**241 PEACHTREE STREET
COCOA FL 32922
US**

~~1611 CHARLES BLVD NE
PALM BAY FL 32907
US~~

3. Date Incorporated or Qualified

04/27/1972

3a. Date of Last Report

04/05/1995

2. Principal Place of Business

2a. Mailing Address

21

26

315 Norwood St.

4. FEI Number

59-6159265

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

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Merritt Island Florida

Zip

Country

Zip

Country

32953-4764 U.S.

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HARGREAVES, RONALD H
1611 CHARLES BLVD NE
PALM BAY FL 32907**

81 Name

Charles E. Slaven Jr

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

315 Norwood St.

83

84 City

Merritt Island

FL

85 Zip Code

32953-4764

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

Charles E. Slaven Jr

Charles E. Slaven Jr

4/1/1996

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **D** ☐ DELETE
NAME **MCCARTHY, RUSSELL, W**
STREET ADDRESS **355 LA ROCHE CT**
CITY-ST-ZIP **MERRITT ISLAND FL**

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

P.D.

☒ Change ☐ Addition

TITLE **SD** ☒ DELETE
NAME **HARGREAVES, RONALD H**
STREET ADDRESS **1611 CHARLES BLVD NE**
CITY-ST-ZIP **PALM BAY FL**

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

**SD
John G McDonald
2975 Thrush Dr #226
Melbourne FL 32935-4571**

☐ Change ☐ Addition

TITLE **TD** ☐ DELETE
NAME **SLAVEN, CHARLES, E, JR**
STREET ADDRESS **315 NORWOOD ST**
CITY-ST-ZIP **MERRITT ISLAND FL**

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **VD** ☒ DELETE
NAME **MCCARTHY, RUSSELL**
STREET ADDRESS **355 LAROCHE LANE**
CITY-ST-ZIP **MERRITT ISLAND FL**

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **D** ☐ DELETE
NAME **DAVIS, HARRY P.**
STREET ADDRESS **3210 N. HARBOUR CITY BLVD #305**
CITY-ST-ZIP **MELBOURNE FL**

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE **PD** ☒ DELETE
NAME **HARGREAVES, RONALD H**
STREET ADDRESS **1611 CHARLES BLVD NE**
CITY-ST-ZIP **PALM BAY FL**

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Charles E. Slaven Jr

4/1/1996 (407) 452-7892

Date

Daytime Phone #

CR2E037 (12/95)