2008 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #733839

SIGNATURE:

1. Entity Name



FILED May 27, 2008 8:00 am Secretary of State 05-27-2008 90041 020 ****61.25

INC.														
Principal Place of Business 1980 N. ATLANTIC AVE. #614/616 COCOA BCH, FL 32931			Mailing Address 200 N FIRST STREET COCOA BEACH, FL 32931 US											
2. Principal Place of Business - No P.O. Box #				3. Mailing Address					0 MIO2 MIO1 18180			H BIBM BABA BI	8/4 8 1 81 (88)	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01042008	Chg-NP		CR2E03	7 (12/06)			
City & State			City & State					4. FEI Numbe 52-108				-	pplied For ot Applicable	
Zip	Country		Zip		Cou	Country		5. Certificate	of Status Des	sired		\$8.75 Ad Fee Require	ditional ed	
6. Name and Address of Current I			l Registere	egistered Agent			7. Name and Address of New Registered Agent							
						Name						_		
RIGERMAN, MARILYN A 200 NORTH FIRST STREET				Street Addre			ddress (F	s (P.O. Box Number is Not Acceptable)						
COCOA BEACH, FL 32931														
•							FL Zip Code						ie	
	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.													
"		<i>i</i> .												
SIGNATURE .	Signature, typed or p	rinted name of registered agent a	nd title il app	licable (NOTI	Registere	d Agent signat	ure required	when reinstating)			DATE		-	
. Signature, typed or printed name of registered agent and title if applicable (NOTF: Registered Agent signature required when reinstating) DATE														
1 mmg - 00 - 0 - 0 - 0 - 0 - 0 - 0 - 0 - 0 -					Election Campaign Financing Trust Fund Contribution.			\$5.00 May B Added to Fees	e			payable ment of S		
10.		ECTORS	CTORS 11.			A	ADDITIONS/CH.	ANGES TO O	FFICERS	S AND DIF	ECTORS II	V 10		
TITLE	DP		☐ Delete 791									☐ Change	☐ Addition	
NAME STREET ADDRESS	DAVIS, JOAI		NAMI T STRE			ET ADDRESS								
CITY-S1-ZIP				CITY									ļ	
THTLE	D			☐ Delele TITE					_			Change Change	Addition	
NAME	GUMBO, CL	AIRE	. NAN			Gumbao, Claire								
STREET ADDRESS	1980 N. ATL						et address {							
CITY-ST-ZIP	COCOA BEACH, FL 32931			CITY										
TITLE	STD KARRORD JOURN			Delete		ھ	. 0	-44			Change	Addition :		
NAME STREET ADDRESS	KABBORD, JOHN 1980 N. ATLANTIC AVE #801			NAM Stre			ME Kerin Pruett Atlantic Ave REEFADDRESS 1980 North Atlantic Ave Y-ST-ZIP Cocon Beach FL3223,							
CITY-ST-ZIP	COCOA BCH, FL			CITY			77.8		0.0	, _F	= 63	2431		
TITLE	Ď	<u> </u>		☐ Delete	TITLE		<u> </u>	 	<u> </u>	•		Change	Addition	
NAME	RUSSELL, RICHARD			N/										
STREET ADDRESS	1980 N ATLANTIC AVE			STR										
CITY-ST-ZIP	COCOA BCH, FL				ST-ZIP			_						
TITLE	D DUDICE MULLIANA			☐ Delete TITLE								☐ Change	☐ Addition	
NAME Street address	BURKE, WILLIAM SS 1980 NORTH ATLANTIC AVENUE			NAM! STRE!									J	
CITY-ST-ZIP	COCOA BEACH, FL 32931				ST-ZIP									
TITLE	D			☐ Delete			·				☐ Change	Addition		
NAME	FERAVOLO, MICHAEL			NA										
STREET ADDRESS 1980 NORTH ATLANTIC AVENU			1	STRE										
CITY-ST-ZIP						ST-ZIP								
indicated of the cor	12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 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 this people 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.													