FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1006

OCU! Corporation	MENT # 739292	2 (1)						
BCARC	C HOMES, INC.							
incipal Place	e of Business	Mailing Address			1 (400-51 (400-00 (1640 1919) (1919) (4014	ID RIBI DIBII DA	MAN MINNA MANDA	DIBIL BIBILIUDI
951 EYSTER BLVD 1694 CEDAR ST ROCKLEDGE FL 32955 ROCKLEDGE FL 32955 US								
		03			3. Date Incorporated or Qualified	1	ate of Last I	•
Dringing Dis	lace of Business	2a. Mailing Address			06/08/1977 4. FEI Number		04/03/1	
гинограгте	ace of positiess	26. Walling Address			59-2193020		 -	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc	;.					Additional
		27			Certificate of Status Desired			Required
City & State	ə	City & State			6. Election Campaign Financing			0 May Be
7.0	Country	28	1 0-		Trust Fund Contribution	LJ		to Fees
Ζιρ	Country 25	Zip 29	30	ountry	This corporation has liability for Florida Statutes	intangible ta ''' Yes [199.032,
	9. Name and Address of Curren			T	10. Name and Address of New F		-	
			·	81 Name			_ -	
DRESSLER, JAMES R.				82 Street Ac	ddress (P.O. Box Number is Not Acceptab	ole)		
110 DIXI						· -,		
	BEACH FL 32931			83				
				L L			85 Zip	Code
				84 City			DOJ 4-1 .	
Pursuant t or register	to the provisions of Sections 617.0502 red agent, or both, in the State of Florid ith, and accept the obligations of, Secti	da. Such change was auth	orized by the	oove-named corr	poration submits this statement for the pur poard of directors. Thereby accept the app	FL rpose of cha cintment as	anging its re	egistered office
. Pursuant t or registen familiar wit SNATURE	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or printed name of registered agent	da. Such change was authion 617.0503, Florida Stati and tite if applicable	norized by the lutes. (NOTE: Registers	pove-named corp corporation's bo	oard of directors. I hereby accept the app uked when reinstating:	rpose of cha ointment as	anging its restreed	egistered offic agent. I am
. Pursuant t or register familiar wit GNATURE _	red agent, or both, in the State of Floric ith, and accept the obligations of, Section Signature, typed or printed name of registered agent OFFICERS AND	da. Such change was authion 617.0503, Florida Stati and tite if applicable	norized by the utes. (NOTE: Registers)	pove-named corp corporation's bo	oard of directors. I hereby accept the app	rpose of cha ointment as DATE ICERS AND	anging its restreed	egistered offic agent. I am
. Pursuant t or registeri familiar wit GNATURE _ t.	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or printed name of registered agent OFFICERS AND	dat. Such change was auft ion 617.0503, Florida Stat and title if applicable D DIRECTORS	(NOTE: Rogistere	pove-named corp corporation's bo so Agent signature require	oard of directors. I hereby accept the app uked when reinstating:	rpose of cha ointment as DATE ICERS AND	anging its restreed	egistered offic agent. I am RS IN 12
. Pursuant t or register familiar wit GNATURE _	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or printed name of registered agent OFFICERS AND LAIBL, JAMES C JR.	dat. Such change was auft ion 617.0503, Florida Stat and title if applicable D DIRECTORS	(NOTE: Registers 1.1	ove-named corporation's bo	oard of directors. I hereby accept the app uked when reinstating:	rpose of cha ointment as DATE ICERS AND	anging its restreed	egistered offic agent. I am RS IN 12
. Pursuant t or register familiar wit GNATURE _ LE ME	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or printed name of registered agent OFFICERS AND	da. Such change was authion 617.0503, Florida Station 617.0503, Florida Station of the diapplicable DIRECTORS	tNOTE: Registers 1.1 1.2 1.3	oove-named corporation's bo so Agent signature require. TITLE	oard of directors. I hereby accept the app uked when reinstating:	pose of che ointment as DATE ICERS AND	anging its resistered	egistered office agent. I am RS IN 12
. Pursuant t or register familiar wit GNATURE _ t. LE ME REET ADDRESS Y-ST-ZIP	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or prived name of registered agent OFFICERS AND D LAIBL, JAMES C JR. 3500 N. SYLVAN LANE MELBOURNE FL T	dat. Such change was auft ion 617.0503, Florida Stat and title if applicable D DIRECTORS	INOTE: Registers 13 1.1 1.2 1.3 1.4 2.1	so Agent signature requirements of the state	oard of directors. Thereby accept the appured when reinstating: ADDITIONS/CHANGES TO OFF	pose of che ointment as DATE ICERS AND	anging its restreed	egistered offic agent. I am RS IN 12
. Pursuant tor register familiar with GNATURE E. ME LEET ADDRESS Y-ST-ZIP LE	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, typed or prived name of registered agent OFFICERS AND LAIBL, JAMES C JR. 3500 N. SYLVAN LANE MELBOURNE FL T BRUNS, PAUL	da. Such change was authion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE	INOTE: Rog-stere INOTE: Rog-stere 13 1.1 1.2 1.3 1.4 2.1 2.2	pove-named corporation's book corporation in the co	oard of directors. Thereby accept the appured when reinstating: ADDITIONS/CHANGES TO OFF	pose of che ointment as DATE ICERS AND	anging its resistered	egistered office agent. I am RS IN 12
Pursuant to register familiar with SNATURE E	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, types or prived name of registered agent OFFICERS AND D LAIBL, JAMES C JR. 3500 N. SYLVAN LANE MELBOURNE FL T BRUNS, PAUL 3165 N. ATLANTIC AVENUE,	da. Such change was authion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE	INOTE: Rogisters 13 11: 12 1.3 1.4 2.1 2.2 2.3	pove-named corporation's bookenamed corporatio	oard of directors. Thereby accept the appoint of directors and the appoint of the	pose of che ointment as DATE ICERS AND	anging its resistered	egistered office agent. I am RS IN 12
Pursuant to register familiar with SNATURE E	red agent, or both, in the State of Floricith, and accept the obligations of, Section of	da. Such change was authion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE	INOTE: Registers INOTE: Registers 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	pove-named corporation's book corporation in the co	oard of directors. Thereby accept the appured when reinstating: ADDITIONS/CHANGES TO OFF	pose of che ointment as DATE ICERS AND	anging its resistered	egistered office agent. I am RS IN 12
. Pursuant to or register familiar with GNATURE E	red agent, or both, in the State of Floric ith, and accept the obligations of, Secti Signature, types or prived name of registered agent OFFICERS AND D LAIBL, JAMES C JR. 3500 N. SYLVAN LANE MELBOURNE FL T BRUNS, PAUL 3165 N. ATLANTIC AVENUE, COCOA BEACH FL D	da. Such change was autrion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE DELETE	INOTE: Rogstere 13 11 12 13 14 21 22 23 24 31	pove-named corporation's bookenamed corporation's bookenamed corporation's bookenamed corporation's bookenamed sugmature requirements. Title NAME STREET ADDRESS CITY-ST-ZIP	oard of directors. Thereby accept the appoint of directors and the appoint of the	pose of che ointment as DATE ICERS AND	anging its reserved D DIRECTO Change	egistered office agent. I am RS IN 12 Addition
. Pursuant to or register familiar with SNATURE E. ME ME HEET ADDRESS Y-SI-ZIP LE ME ME HEET ADDRESS Y-SI-ZIP LE ME ME HEET ADDRESS Y-SI-ZIP LE ME	red agent, or both, in the State of Floricith, and accept the obligations of, Section of	da. Such change was autrion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE DELETE	INOTE: Rogisters 13 11 11 12 13 14 21 22 23 24 31 32	pove-named corporation's book or corporation	oard of directors. Thereby accept the appoint of directors and the appoint of the	pose of che ointment as DATE ICERS AND	anging its reserved D DIRECTO Change	egistered office agent. I am RS IN 12 Addition
Pursuant to or register familiar with SNATURE. E.E. ME. EET ADDRESS Y-ST-ZIP. EET ADDRESS Y-ST-ZIP. EET ADDRESS Y-ST-ZIP. E.E. ME. EET ADDRESS SEET ADDRESS SEET ADDRESS	red agent, or both, in the State of Floricith, and accept the obligations of, Section of	da. Such change was authion 617.0503, Florida State and the if applicable D DIRECTORS DELETE R.H., #4	INOTE: Rogisters 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3	pove-named corporation's book and signature requirements of the corporation's book and a signature requirements of the corporation's book and a signature requirements. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	oard of directors. Thereby accept the appoint of directors and the appoint of the	pose of che ointment as DATE ICERS AND	anging its reserved D DIRECTO Change	egistered office agent. I am RS IN 12 Addition Addition
. Pursuant to or register familiar with GNATURE LE ME ME MEET ADDRESS Y-ST-ZIP LE	red agent, or both, in the State of Floricith, and accept the obligations of, Section of	da. Such change was autrion 617.0503, Florida State and title if applicable. D DIRECTORS DELETE DELETE	INOTE: Rogisters 13 11: 12 13 14 21: 22 23 24 31: 32 33 34.	DOVE-named corporation's book and a signature requirements of the components of the	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved D DIRECTO Change	egistered office agent. I am RS IN 12 Addition
. Pursuant to or register familiar with GNATURE LE ME ME MEET ADDRESS Y-ST-ZIP LE MEET ADDRESS Y-ST-ZIP LE MEET ADDRESS Y-ST-ZIP LE MEET ADDRESS Y-ST-ZIP LE ME ME MEET ADDRESS Y-ST-ZIP LE ME ME ME ME ME ME ME ME ME	red agent, or both, in the State of Floricith, and accept the obligations of, Section of	da. Such change was authion 617.0503, Florida State and the if applicable D DIRECTORS DELETE R.H., #4	INOTE: Rogisters 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2	DOVE-named corporation's book and a signature requirements of the components of the	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition
Pursuant to or register familiar with SNATURE	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was authion 617.0503, Florida State and the if applicable D DIRECTORS DELETE R.H., #4	INOTE: Registers 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3	DOVE-named corporation's book and a signature requirements of the components of the	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition
Pursuant to or register familiar with familiar fa	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and title if applicable D DIRECTORS DELETE R.H., #4	INOTE: Registers 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4	DOVE-named corporation's book and signature requirements of the corporation's book and a signature requirements. TITLE NAME STREET ADDRESS CITY-ST-ZIP	oard of directors. Thereby accept the appoint of directors and the appoint of the	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
Pursuant to or register familiar with SNATURE	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4	INOTE: Registers 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1	DOVE-named corporation's book of Agent signature requirements of the Corporation's book of Agent signature requirements of the Corporation's book of Agent signature requirements of the Corporation of the	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition
Pursuant to or register familiar with grading with grading states of the	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4	INOTE: Rogisters 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.1 4.2 4.3 4.1 5.1 5.2	DOVE-named corporation's book and signature requirements of the corporation's book and a signature requirements. TITLE NAME STREET ADDRESS CITY-ST-ZIP	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
Pursuant to or register familiar with grant to or register familiar with grant to or register with grant to grant to or grant to grant to or grant to	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4	INOTE: Progressors 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.1 4.2 4.3 5.1 5.2 5.3	DOVE-named corporation's book of Agent signature requirements of the components of t	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
Pursuant to or register familiar with GNATURE	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4	INOTE: Rogisters 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.1 4.2 4.3 4.1 5.1 5.2 5.3 5.4	DOVE-named corporation's book of Agent signature requirements of the comporation's book of the composition o	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
. Pursuant t or register familiar wit	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4 DELETE DELETE	INOTE: Progreters 13 1.1 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.4 4.1 4.2 4.3 5.1 5.2 5.3 5.4 6.1	DOVE-named corporation's book of Agent signature requirements of the comporation's book of the composition o	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition
Pursuant to or register familiar with GNATURE	red agent, or both, in the State of Floricith, and accept the obligations of, Section, and accept the obligations of, Section of Sec	da. Such change was aufficion 617.0503, Florida State and tite of applicable D DIRECTORS DELETE R.H., #4 DELETE DELETE	INOTE: Registers 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4 3.1 3.2 3.3 4.4 4.1 4.2 4.3 5.1 5.2 5.3 5.4 6.1 6.2	DOVE-named corporation's book on Agent signature requirements of the comporation's book of the components of the compone	oard of directors. Thereby accept the appointed when reinstating: ADDITIONS/CHANGES TO OFF Swift, Barry 201 Barron BINA Rock ledge, FL	DATE ICERS AND	anging its reserved. D DIRECTO Change Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED PRI