

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 743396

1. Entity Name

SOUTH BREVARD SENIORS ASSOCIATION, INC.

Principal Place of Business

618 E. MELBOURNE AVE.
MELBOURNE FL 32901
US

Mailing Address

618 E MELBOURNE AVE
MELBOURNE FL 32901
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1898531

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

GOOD, ALICE
1120 SALEM RD
MELBOURNE FL 32901

Name

Elaine Dinho

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

2717 N. Wickham Rd. Suite 3

Melbourne, FL 32935

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.

SIGNATURE

Elaine Dinho

ELAINE DINHO

1/21/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	☒ Delete
NAME	GOOD, ALICE	
STREET ADDRESS	1120 SALEM RD	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	VD	☒ Delete
NAME	MASSEY, PAUL	
STREET ADDRESS	1290 CYPRESS BEND CIR	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	VD	☐ Delete
NAME	HILDA, MAHONEY	
STREET ADDRESS	2927 GEMINU AVE	
CITY-ST-ZIP	PALM BAY FL 32907	
TITLE	SD	☒ Delete
NAME	MAYER, GAYE	
STREET ADDRESS	1054 SUN FLOWER LN	
CITY-ST-ZIP	PALM BAY FL	
TITLE	TD	☐ Delete
NAME	NORWALK, BETTY BYERS	
STREET ADDRESS	50 NEW YORK WAY	
CITY-ST-ZIP	ROCKLEDGE FL	
TITLE	TDA	☐ Delete
NAME	KRAISEL, HY	
STREET ADDRESS	500 PALM SPRINGS BLVD., #209	
CITY-ST-ZIP	INDIAN HARBOR BEACH FL	

TITLE	PD	☒ Change ☐ Addition
NAME	PAUL MASSEY	
STREET ADDRESS	1290 CYPRESS BEND CIR.	
CITY-ST-ZIP	MELBOURNE, FL. 32934	
TITLE	VD	☐ Change ☒ Addition
NAME	MARVIN HEINZ	
STREET ADDRESS	10 PEPPER DRIVE	
CITY-ST-ZIP	MELBOURNE, FL. 32903	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	☐ Change ☒ Addition
NAME	SHIRLEY MASSEY	
STREET ADDRESS	1290 CYPRESS BEND CIR.	
CITY-ST-ZIP	MELBOURNE, FL. 32934	
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 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 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, with all other like empowered.

SIGNATURE: Betty Byers Norwalk 1/18/02 321-254-8429

FILED
Feb 10, 2002 8:00 am
Secretary of State

02-10-2002 90048 050 ****61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/01)