

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90258 013 ****70.00

DOCUMENT # 744362

1. Entity Name
CENTRAL BREVARD SHARING CENTER, INC.



Principal Place of Business
**113 AURORA ST.
P.O. BOX 2176
COCOA, FL 32923-9176**

Mailing Address
**P.O. BOX 2176
COCOA, FL 32923-9176 US**

50000064



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

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01082007 Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-1839108

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**PRICE, EDWARD W
963 SABLE LANE
ROCKLEDGE, FL 32955**

7. Name and Address of New Registered Agent

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2007**

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 **D** ☒ Delete
NAME **CRAWFORD, DAVID E**
STREET ADDRESS **1460 JAMES AVE**
CITY-ST-ZIP **MERRITT ISLAND, FL 32953**

TITLE **D** ☒ Delete
NAME **DARBY, J LEROY**
STREET ADDRESS **4733 JULLIAN LANE**
CITY-ST-ZIP **COCOA, FL 32926**

TITLE **D** ☒ Delete
NAME **HOWES, RICHARD F**
STREET ADDRESS **1210 ROCK SPRINGS DR**
CITY-ST-ZIP **MELBOURNE, FL 32940**

TITLE **D** ☒ Delete
NAME **PRICE, EDWARD W**
STREET ADDRESS **963 SABLE LANE**
CITY-ST-ZIP **ROCKLEDGE, FL 32955**

TITLE **D** ☒ Delete
NAME **JACKSON, BARBARA**
STREET ADDRESS **1206 MYRTLE LANE**
CITY-ST-ZIP **COCOA, FL 32922**

TITLE **D** ☒ Delete
NAME **JARVIS, LANCE P**
STREET ADDRESS **3863 BEECHGROVE RD**
CITY-ST-ZIP **MELBOURNE, FL 32934**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **CHAIRMAN** ☐ Change ☒ Addition
NAME **Scott Burcham**
STREET ADDRESS **180 STEWART DRIVE**
CITY-ST-ZIP **MERRITT ISLAND FL 32952**

TITLE **VICE CHAIRMAN** ☐ Change ☒ Addition
NAME **JOSEPH BRUBAKER**
STREET ADDRESS **1922 INDEPENDANCE AVE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE **VICE CHAIRMAN** ☐ Change ☒ Addition
NAME **William Schaefer**
STREET ADDRESS **375 MAPLEWOOD Blvd**
CITY-ST-ZIP **COCOA FL 32926**

TITLE **SECRETARY** ☐ Change ☒ Addition
NAME **ELIZABETH J SMITH**
STREET ADDRESS **1410 HOLIDAY BLVD**
CITY-ST-ZIP **MERRITT ISLAND FL 32952**

TITLE **TREASURER** ☐ Change ☒ Addition
NAME **FRED SHAY**
STREET ADDRESS **5935 N. TROPICAL TRAIL**
CITY-ST-ZIP **MERRITT ISLAND FL 32953**

TITLE **DIRECTOR** ☐ Change ☒ Addition
NAME **REV. CLARICE MITCHELL**
STREET ADDRESS **1476 WELLINGTON CIRCLE**
CITY-ST-ZIP **ROCKLEDGE FL 32955**

12. I hereby certify that the information supplied with this filing 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 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 another like empowered.

SIGNATURE: Edward W Price, President/CEO

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/07

321-631-0306

Daytime Phone #