


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 11, 2006 08:00 AM**  
**Secretary of State**

**DOCUMENT # 745925**

1. Entity Name  
**BUSINESS IMPROVEMENT COUNCIL OF COCOA BEACH, INC.**



Principal Place of Business      Mailing Address

BOX 320303      BOX 320303  
 COCOA BEACH, FL 32932 US      COCOA BEACH, FL 32932 US

**DO NOT WRITE IN THIS SPACE**



01062006 No Chg-NP CR2E037 (11/05)

4. FEI Number      Applied For  
**59-2128290**      Not Applicable

5. Certificate of Status Desired       **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**LEONARD, L. GEORGE**  
 1485 M ATLANTIC AVE., #112  
 COCOA BEACH, FL 32931

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.       **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	ARMSTRONG, LANCE
STREET ADDRESS	320 N ATLANTIC AVE
CITY-ST-ZIP	COCOA BCH, FL 32931
TITLE	S
NAME	ANTHONY, ED
STREET ADDRESS	605 N ATLANTIC AVE
CITY-ST-ZIP	COCOA BCH, FL 32931
TITLE	T
NAME	LEONARD, L GEORGE
STREET ADDRESS	1485 N ATLANTIC AVE, SUITE 112
CITY-ST-ZIP	COCOA BCH, FL 32931
TITLE	D
NAME	TALBOT, CHUCK
STREET ADDRESS	336 TAFT AVE
CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	P
NAME	CUNNINGHAM, PETER
STREET ADDRESS	838 NASSAU RD
CITY-ST-ZIP	COCOA BEACH, FL 32931
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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U00000382482  
 01/12/06-80013-009 61.25

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 all other like empowered.

SIGNATURE: *L. George Leonard*      1/8/06      \_\_\_\_\_  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #