

06/08/99 90085 013 62.50
FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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FILED

99 JUL 20 PM 3:31

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 748162

1. Corporation Name
SOUTH BREVARD HISTORICAL SOCIETY, INC.

Principal Place of Business 101 CENTRAL ROAD INDIAN HARBOR BEACH FL 32937 US	Mailing Address PO BOX 1064 MELBOURNE FL 32902 US
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2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 07/23/1979
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.	4. FEI Number 59-2017622
23 City & State	28 City & State	Applied For Not Applicable
24 Zip	25 Country	29 Zip
	30 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent PREECE, BETTY P. 615 N. RIVERSIDE INDIALANTIC FL 32903	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 85 Zip Code FL
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11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE NO CHANGE Betty P. Preece DATE 5/5/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE D	<input type="checkbox"/> DELETE KJERULFF, GEORGIANA Director 710 ACACIA AVE. MELBOURNE VILLAGE FL VP.	1.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DS	<input type="checkbox"/> DELETE BROWN, BETTY Director 328 W.PATRICK CIR. Secretary MELBOURNE FL	2.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE DP	<input type="checkbox"/> DELETE PREECE, BETTY Director 615 N. RIVERSIDE President INDIALANTIC FL	3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D	<input type="checkbox"/> DELETE WAGNER, HESTER Director 6885 WARD PARKWAY MELBOURNE VILLAGE FL	4.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	<input type="checkbox"/> DELETE Noyd, Ellen Director 21 W. Vida Way Melbourne FL 32901	5.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Betty Preece DATE 5/1/99 Daytime Phone # 407 723 6835

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