2000 UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an address, with all other like empowered

FILED DOCUMENT # 754399 Mar 04, 2000 8:00 am **Secretary of State** GERMAN-AMERICAN SOCIAL CLUB OF BREVARD, INC. 03-04-2000 90016 041 ****61.25 Principal Place of Business Mailing Address 2515 HERITAGE DRIVE 2515 HERITAGE DRIVE TITUSVILLE FL 32780-3319 TITUSVILLE FL 32780 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-2159232 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) THOMSON, INGEBORG C. 4330 PEPPER TREE STREET COCOA BEACH FL 32926 City Zip Code FL 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing FILE NOW: Make Check Payable to \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State** FEE IS \$61.25 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Addition TITLE ☐ Delete NAME MLODZIANOWSKI, RUTH NAME STREET ADORESS STREET ADDRESS 2515 HERITAGE DR. CITY-ST-ZIP CITY-ST-ZIP TITUSVILLE FL ☐ Delete TITLE Change ☐ Addition TITLE NAME NAME anglin, Helga STREET ADDRESS STREET ADDRESS 2510 GRAN TETON BLVD. CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL ☐ Change ☐ Addition TITLE TITLE D ☐ Delete NAME MAURER, HELGA NAME STREET ADDRESS STREET ADDRESS 2673 CORBUSIER DR CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 32935 □ Change ☐ Addition THILE ☐ Delete TITLE NAME NAME KISCHNER, RUTH STREET ADDRESS STREET ADDRESS 1489 BRONCO DR CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL_32940 TITLE Delete TITLE Change ☐ Addition NAME SHERMAN, HARLAND STREET ADDRESS STREET ADDRESS 3285 SAVANNAHS TRAIL CITY-ST-ZIP CITY-ST-ZIP MERRITT ISLAND FL 32953 TITLE Delete TITLE Change ☐ Addition NAME KUEHNHOLD, HEIDI NAME STREET ADDRESS STREET ADDRESS 2200 BREEZY CIRCLE CITY-ST-ZIP CITY-ST-ZIP MELBOURNE FL 12. Thereby certify that the information supplied with this filling 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