

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2006 8:00 am
Secretary of State

03-21-2006 90014 002 ****61.25

DOCUMENT # 754399 1. Entity Name GERMAN-AMERICAN SOCIAL CLUB OF BREVARD, INC.			
Principal Place of Business 2515 HERITAGE DRIVE TITUSVILLE, FL 32780		Mailing Address 2515 HERITAGE DRIVE TITUSVILLE, FL 32780	
2. Principal Place of Business 720 WICKHAM LAKES DR.		3. Mailing Address P.O. BOX 410 918	
Suite, Apt. #, etc. DR.		Suite, Apt. #, etc. DR.	
City & State MELBOURNE - FL		City & State MELBOURNE - FL	
Zip 32940		Zip 32941-0918	
Country USA		Country USA	
4. FEI Number 59-2159232		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent THOMSON, INGEBORG C. 4230 PEPPER TREE STREET COCOA BEACH, FL 32926		7. Name and Address of New Registered Agent Name: CARL LUEDEBS Street Address (P.O. Box Number is Not Acceptable): 720 WICKHAM LAKES DRIVE City: MELBOURNE, FL Zip Code: 32940	
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: March 16, 2006			
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MLODZIANOWSKI, RUTH 2515 HERITAGE DR. TITUSVILLE, FL	<input type="checkbox"/> Delete	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V ANGLIN, HELGA 2510 GRAN TETON BLVD. MELBOURNE, FL	<input type="checkbox"/> Delete	P CARL LUEDEBS 720 WICKHAM LAKES DR. MELBOURNE, FL 32940 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JOHNSON, FRANK 4255 WOODHAVEN DR MELBOURNE, FL 32935	<input type="checkbox"/> Delete	V RUTH MLODZIANOWSKI 2515 HERITAGE DR TITUSVILLE, FL 32780 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S JOHNSON, MARCELLE 4253 WOOD HAVEN DR MELBOURNE, FL 32935	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D THAN- JONES, ELKE 974 PINSON BLVD ROCKLEDGE, FL 32952328	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OSBORNE, ALBERT 765 OUTER DR COCOA, FL 32926	<input type="checkbox"/> Delete	D ANNI BENNETT 1101 INDIAN OAKS DR. MELBOURNE, FL 32901 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			

40034120



02062006 Chg-NP CR2E037 (11/05)

ATTACHMENT

40034743
754399

Dear Sir or Madame,

Please make changes as
noted. Enclosed is check
for \$61.25.

Dennis L. Bennett
Treasurer
GASC of Nevada

2

16 MAR 2006