

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 09, 2004 8:00 am
Secretary of State

03-09-2004 90004 017 ****61.25

DOCUMENT # 763969

1. Entity Name

SPACE COAST STREET RODS, INC.



Principal Place of Business

P.O. BOX 560101
ROCKLEDGE FL 32956

Mailing Address

P.O. BOX 560101
ROCKLEDGE FL 32956

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2465196

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DIXON, RONALD C
2155 LOIS LANE
COCOA FL 32926

7. Name and Address of New Registered Agent

Name PHILLIP A. BAUMBACH

Street Address (P.O. Box Number is Not Acceptable)

635 FORD CIRCLE WEST

City MELBOURNE

FL

Zip Code 32935

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 Phillip A. Baumbach PHILLIP A. BAUMBACH PD

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

(NOTE: Registered Agent signature required when reinstating)

3/22/04

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 VPD ☒ Delete
NAME HEGI, TODD
STREET ADDRESS 1320 NEWFOUND HALBER DR
CITY-ST-ZIP MERRITT ISLAND FL 32952

TITLE PD ☒ Delete
NAME DIXON, RONALD
STREET ADDRESS 2155 LOIS LANE
CITY-ST-ZIP COCOA FL 32926

TITLE TD ☒ Delete
NAME DIXON, LOIS D
STREET ADDRESS 2155 LOIS LANE
CITY-ST-ZIP COCOA FL 32926

TITLE SD ☒ Delete
NAME PAUL, JOSEPH
STREET ADDRESS 1307 HUNTINGTON LANE
CITY-ST-ZIP ROCKLEDGE FL 32955

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☒ Change ☐ Addition
NAME Phillip A Baumbach
STREET ADDRESS 635 Ford Cir W
CITY-ST-ZIP Melbourne, FL 32935-3971

TITLE VD ☒ Change ☐ Addition
NAME DAVE MCPHERSON
STREET ADDRESS 630 JACKSON CT.
CITY-ST-ZIP SATELLITE BEACH, FL. 32937

TITLE TD ☒ Change ☐ Addition
NAME CLYDE ALDRIDGE
STREET ADDRESS 25448 BARTHOLOMEW ST.
CITY-ST-ZIP CHRISTMAS, FL. 32709

TITLE SD ☒ Change ☐ Addition
NAME GRACE CAREY
STREET ADDRESS 2980 PENNSYLVANIA ST.
CITY-ST-ZIP WEST MELBOURNE, FL 32904

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 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: Phillip A. Baumbach PHILLIP A. BAUMBACH 3/22/04 321-863-5881

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #