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2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 27, 2001 8:00 am
Secretary of State
03-12-2001 90432 031 ****61.25

DOCUMENT # 768463

1. Entity Name

ESTATE PLANNING COUNCIL OF BREVARD COUNTY, INC.

Principal Place of Business	Mailing Address
410 N MIRAMAR AVE INDIALANTIC FL 32903 US	410 N MIRAMAR AVE INDIALANTIC FL 32903 US

DO NOT WRITE IN THIS SPACE

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 59-6862388 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NASH, CHARLES IAN 930 SOUTH HARBOR CITY BLVD STE 505 MELBOURNE FL 32901	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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

FILE NOW: FEE IS $61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD KEY, CATHERINE 2817 N WILLHAM RD #3 MELBOURNE FL 32940	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PSimms, Pennie D President 1004 Beverly Dr Rockledge FL 32956	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP SIMMS, PENNIE 1004 BEVERLY DR SKF ROCKLEDGE FL 32956	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D Whittaker, Ken 1692 W Hibiscus Blvd Melbourne FL 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP WHITTAKER, KEN 1692 W HISBISCUS BLVD MELBOURNE FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Anderson, Laura 930 S Harbor City Blvd #505 Melbourne FL 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ANDERSON, LAURA 930 S HARBOR CITY BLVD #505 MELBOURNE FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Rice, Sandy 4690-4 Beck Lake Tr Melbourne FL 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T RICE, SANDY 4690-4 BECK LAKE TR MELBOURNE FL 32901	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Moisand, Dan 6767 N Wickham Rd #400 Melbourne FL 32940	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MOISANO, DAN 1361 BEDFORD DR STE 103 MELBOURNE FL 32940	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Jones, Dennis P O Box 2642 Satellite Beach FL 32937	☐ Change ☑ Addition

CR2E037 (10/00)

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: [signature] REQUIRED 3/8/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #