2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 10, 2003 8:00 am
Secretary of State
02-25-2003 90120 006 ****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

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

☐ CHECK HERE IF MAKING CHANGES

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

NASH, CHARLES IAN
930 SOUTH HARBOR CITY BLVD
STE 505
MELBOURNE FL 32901

7. Name and Address of New Registered Agent

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. 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

FILE NOW: FEE IS $61.25

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 / NAME / STREET ADDRESS / CITY-ST-ZIP	T KRASNY, SCOTT 301 S HARBOR CITY BLVD, #201 MELBOURNE FL 32901	☑ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S JONES, DENNIS PO BOX 2042 SATELLITE BEACH FL 32937	☑ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD WHITTAKER, KEN 1692 W HIBISCUS BLVD MELBOURNE FL 32901	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD ANDERSON, LAURA 930 S HARBOR CITY BLVD #505 MELBOURNE FL 32901	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D FORBER, DARCY 1025 S BABCOCK ST MELBOURNE FL 32901	☐ Delete
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MOISAND, DAN 1361 BEDFORD DR STE 103 MELBOURNE FL 32940	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres D Laura Anderson 930 S Harbor City Blvd #505 Melbourne FL 32901	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D Dan Moisand 1361 Bedford Dr #103 Melbourne FL 32940	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP D Darcy Forber	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas Sect Kurt Panouses 8240 Dereveux Dr Ste 100 Melbourne FL 32940	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREAS Gina Howard 215 Baytree Dr Melbourne FL 32940	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	At-Large Randy Coleman 775 E Merritt Island Cswy #300 Merritt Island FL 32952	☐ Change ☑ Addition

CR2E037 (10/02)

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
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/18/03
Date

321-984-3300
Daytime Phone #