2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR

J99970 **DOCUMENT #** 1. Entity Name

LIQUID ASSETS OF BREVARD, INC



FILED Jan 14, 2003 8:00 am Secretary of State 01-14-2003 90049 032 ***150.00

Principal Place of Business 218B N. A1A SATELLITE BEACH FL 32937		Mailing Address P.O. BOX 488 CAPE CANAVERAL FL 32920-0488						
2. Principal Place of Business		3. Mailing Address				JEH BIBIL BIBIL BIBIL	I BIBII DIBII (BBI	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			☐ CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. F	FEI Number 59-2855319	}—	Applied For Not Applicable	
Σίρ - -	Country-	. Zip	Country .=	*5.	Certificate of Status Desired	\$8.75-Ad	lditional -	
	6. Name and Address of Current I	Registered Agent	<u> </u>	7. 1	lame and Address of New Regi	•	-	
Burgett, Stacy L 1970 Michigan Avenue, Bldg. C Cocoa Beach Fl 32922			Name Street /	Name Street Address (P.O. Box Number is Not Acceptable)				
	JOHN COLULE		City			FL Zip Coo	de	
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								
Afte	ILE NOW!!! FEE IS \$150.00 • May 1, 2003 Fee will be \$550.00 • Payable to Fiorida Department of			Election Campaign Financ Trust Fund Contribution.	~ _ ~~	00 May Be d to Fees		
10.	OFFICERS AND [DIRECTORS	11.	ADI	DITIONS/CHANGES TO OFFICER	RS AND DIRECTOR	S IN 11	
TITLE NAME STREET AODRESS CITY-ST-ZIP	D Burgett, Frederick C Jr 220 Arthur Avenue Cocoa Beach Fl	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT Burgett, Stacy L 1970 Michigan Ave, Bldg.C Cocoa Fl 32922	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Chánge	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPS JACOBSEN, JAMES F 3142 CALGARY STREET MELBOURNE FL 32935	₩ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	1226 P	t, Brooks B. otomac Drive t Island, FL 32	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	-	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition .	

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 607, 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: Frederick Unit of the