FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 07 1998 8:00am Secretary of State

DOCUMENT # L86719 (6)							
	P. OF BREVARD, INC.						
Principal Place of Business Mailing Address					4 statemis and shire thing the state state as in a shire as	A11 B1A11 A1211 A11	ist Minut Lift.
8580 N. ATL GAPE CANA US	ANTIC AVE. VERAL FL 32920	8580 N. ATLANTIC AVE. CAPE CANAVERAL FL 32820 US		DO NOT WRITE IN THIS	SPACE		
					3. Date Incorporated or Qualified		1
2. Principal Place of Business 2a. Mailing Address					07/12/1990 4. FE! Number	Ι [Δι	polied For
21		26		59-3020545	<u> </u>	ot Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.				Additional	
22		27		5. Certificate of Status Desired	Fee Re	pquired	
City & State	е	City & State		6. Election Campaign Financing 1 rust Fund Contribution	\$5.00 Added		
Zip	Country	Zφ	Country	,	8. This corporation owes or has paid the cu		- ~ ı
24	25 29 3 9, Name and Address of Current Registered Agent		30		Personal Property Tax due June 30. Yes		J No
				Name		- Agent	
LEVAN, JAMES JOSO NEW HAMPTON WAY				Chrost Age	VCKER PAUL E dress (P.O. Box Number is Not Acceptable)		
MERRITT ISLAND FL 92953				Street Add	60 SALMON ST		1
TUCKER, PAUL & 1560 SALMON ST MERRITT ISLAND, FL 32952				City		85 Zip	Code
	SERRITT ISLAND	D,FL 32952	84	M	ERRITT ISLAND FL	- .3	295Z
11. Pursuant to the provisions of Sections 607.05:02 and 607.15:08. Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered. I							
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiary in, and accept the obligations of Section 607.0505, Florida Statutes.							
SIGNATURE	Signature, typed or profed name of rape fered ages	and tile if applicable INOTE	Redistered Apr	ont spoulure requ	pred when reastaing) DATE	70	[
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOR	S IN 12
TITLE	4-	DELETE	1 1 TITLE			Change	☐ Addition
NAME (L EVAN, JAMES		1.2 NAME];
STREET ADDRESS	1000 11211 1111111111111111111111111111		1.3 STREET	ADDRESS			ļį
CITY-ST-ZIP			14 CITY-S	T-ZIP			1 4 4 19 2 1
TIFLE	ESS P	☐ DELETE	2 1 TITLE	1		☐ Change	Addition
NAME	TUCKER, PAUL E 1560 SALMON ST.		22 NAME 23 STREET	Abbrece			
STREET ADDRESS	MERRITT ISLAND FL		2 4 CiTY-5	l l			
CITY-ST-ZIP TITLE	MERRITI ISLAND FE	DELETE	3 1 TITLE	81 · ZIF		Change	Addition
NAME			32 NAME				
STREET ADDRESS			3.3 STREET	ADDRESS			1
CITY-ST-ZIP			34 CHTY-5	ST-ZIP			}
TITLE		DFLFTE	4.1 TITLE			Change	Addition
NAME			4 2 NAME				
STREET ADDRESS			4 3 STHEET	ADDRESS			1
CITY-ST-ZIP			4.4 CITY - S	T-ZIP		П.	
TITLE		[_] DELETE	5.1 TITLE	}		Change	Addition
NAME			5.2 NAME				[
STREET ADDRESS			53 STREET	1			}
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·	5 4 CITY S	T-ZIP		П.	

14. Thereby 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 annual report or supplimental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receivur or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address

6.2 NAME

6.3 STREET ADDRESS 6.4 CHY-ST-ZIP

SIGNATURE:

STREET ADDRESS

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFIC

1/23/98

Daytime Phone # 0106474