

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000001220

FILED  
Apr 26, 2009  
Secretary of State

Entity Name: SPACECOAST AUTHORS OF ROMANCE, INC.

## Current Principal Place of Business:

4625 WHIPPLE HOLLOW RD  
MELBOURNE, FL 32934 US

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 410787  
MELBOURNE, FL 32941 US

## New Mailing Address:

FEI Number: 59-3663056

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COOPER, LAURIE  
4625 WHIPPLE HOLLOW RD  
MELBOURNE, FL 32934 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: T ( ) Delete  
Name: FREEMAN, LAURA  
Address: 4837 VERONA CIRCLE  
City-St-Zip: MELBOURNE, FL 32940

Title: P ( ) Delete  
Name: PARKS, SANDY  
Address: 3899 BEECHGROVE RD  
City-St-Zip: MELBOURNE, FL 32934

Title: S ( ) Delete  
Name: CLAY, PATRICIA  
Address: 1807 ABBEY RIDGE DR  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP ( ) Delete  
Name: PAINTER, KRISTEN  
Address: 4626 MERLOT DR  
City-St-Zip: ROCKLEDGE, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: T (X) Change ( ) Addition  
Name: HENSLEY, CARRIE  
Address: 918 JACK PINE COURT  
City-St-Zip: ROCKLEDGE, FL 32955

Title: P (X) Change ( ) Addition  
Name: PEADEN, STEPHANIE  
Address: 1287 FOX COURT  
City-St-Zip: TITUSVILLE, FL 32780

Title: S (X) Change ( ) Addition  
Name: GRIFFIN, MARIAN  
Address: 1011 ABADA COURT NE  
City-St-Zip: PALM BAY, FL 32905

Title: VP (X) Change ( ) Addition  
Name: DIDIER, CAROL  
Address: 2969 KOSUTH ROAD NE  
City-St-Zip: PALM BAY, FL 32905

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CARRIE HENSLEY

T

04/26/2009

Electronic Signature of Signing Officer or Director

Date