2/3/

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 09, 2001 8:00 am
Secretary of State
02-03-2001 90281 002 ****61.25

DOCUMENT # N00000003261

1. Entity Name

THE CENTRAL BREVARD ART ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~425 BREVARD AVENUE~~ ~~COCOA FL 32922~~	P.O. BOX 1274 COCOA FL 32923

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
1015A Florida Ave	
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Rockledge, FL	City & State
Zip: 32955 Country: Brevard	Zip Country

4. FEI Number: 23-735470 ☑ 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
JONES, GENIE 425 BREVARD AVENUE COCOA FL 32922	Name: Anita Bieske Street Address (P.O. Box Number is Not Acceptable): 1015 A. Florida Ave City: Rockledge FL Zip Code: 32955

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: Anita Bieske 1/31/01
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	D JONES, GENIE 1321 HERITAGE ACRES BLVD. ROCKLEDGE FL 32955	☑ Delete	D. ANITA Bieske 1260 ISLAND DR. MERRITT ISLAND FL 32952	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BERNARD, CLAUDINE 3747 TOMLIN DRIVE COCOA FL 32926	☑ Delete	D. Anna Jo VAHLE 2610 OVERLOOK Ct. MERRITT ISLAND, FL 32953	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAWRENCE, NATASHA 12 STONE STREET COCOA FL 32922	☑ Delete	D Ruth BARNHART 6250 CAPSTAN Ct. Rockledge, FL 32955	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CATTANI, LOU 200 S. SYKES CREEK PKWY., #A-8 MERRITT ISLAND FL 32952	☑ Delete	D. BILL DOW 1283 Royal BIRKDALE CIR Rockledge, FL 32955	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARNHART, RUTH 6250 CAPSTAN COURT ROCKLEDGE FL 32955	☐ Delete	D Brenda Reece 275 Willow Ave MERRITT ISLAND, FL 32953	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	D James LaRocque 495 BELLA CAPRI DR MERRITT ISLAND, FL 32952	☐ 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: Anita Bieske REQUIRED 1/31/01
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #