## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000007144

Entity Name: BREVARD ASTRONOMICAL SOCIETY, INC.

FILED Apr 20, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

1519 CLEARLAKE ROAD MERRITT ISLAND, FL 32952

Current Mailing Address: New Mailing Address:

P.O. BOX 1084 COCOA, FL 32923

FEI Number: 59-2531751 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MANLEY, BILL

230 PRICE CT.

SATELLITE BEACH, FL 32937 US

JONES, ANTHONY M
1290 DATON RD SW
PALM BAY, FL 32908 US

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: ANTHONY M JONES 04/20/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP ( ) Delete Title: VP (X) Change ( ) Addition Name: DARNELL, KEN Name: FERGUSON, JAN

 Address:
 6960 CREPE MYRTLE DR.
 Address:
 112 GRACE AVENUE

 City-St-Zip:
 GRANT, FL 32949
 City-St-Zip:
 COCOA, FL 32922

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: CUPOLI, RICK Name: SCOTT, GARY

Address: 4145 LONS LEAF Address: 1282 SORENTO CIRCLE

City-St-Zip: MELBOURNE, FL 32924 City-St-Zip: WEST MELBOURNE, FL 32904

Title: TD () Delete Title: T (X) Change () Addition Name: MANLEY, WILLIAM Name: JONES, ANTHONY

 Name:
 MANLEY, WILLIAM
 Name:
 JONES, ANTHONY

 Address:
 230 PRICE COURT
 Address:
 1290 DATON RD SW

 City-St-Zip:
 SATELLITE BEACH, FL 32937
 City-St-Zip:
 PALM BAY, FL 32908

Title: S () Delete Title: S (X) Change () Addition

 Name:
 CRAVEN, BRYAN
 Name:
 BOYD, MEGAN

 Address:
 PO BOX 3201
 Address:
 1101 ABINGTON ST

 City-St-Zip:
 COCOA, FL 329243201
 City-St-Zip:
 COCOA, FL 32922

I hereby certify that the information supplied with this filing does not qualify for the 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: ANTHONY JONES T 04/20/2006