

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # NO1000001641

1. Entity Name

WEST MELBOURNE ELEMENTARY NONPROFIT CORPORATION

Principal Place of Business

2255 MEADOWLANE AVE
MELBOURNE FL 32904

Mailing Address

2255 MEADOWLANE AVE
MELBOURNE FL 32904

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-3705777

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

TAYLOR, JOHN
370 RIO LANE
INDIALANTIC FL 32903

Name Juliette Bailer

Street Address (P.O. Box Number is Not Acceptable)

467 Rome Ave

City PALM BAY

FL

Zip Code 32907

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

John Taylor, President

John Taylor

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 D ☒ Delete
NAME GRAND, MELANIE
STREET ADDRESS 3850 BURTON RD
CITY-ST-ZIP VALKARIA FL 32950

TITLE Director ☐ Change ☒ Addition
NAME Adrienne Roth
STREET ADDRESS 633 Desoto Ln.
CITY-ST-ZIP Indian Harbor Bch, FL 32937

TITLE D ☒ Delete
NAME PIERCE, VALERIE
STREET ADDRESS 1833 WOODBERRY CIRCLE
CITY-ST-ZIP MELBOURNE FL 32935

TITLE Director, President ☐ Change ☒ Addition
NAME Juliette Bailer
STREET ADDRESS 467 Rome Ave.
CITY-ST-ZIP PALM BAY, FL 32907

TITLE D ☐ Delete
NAME WINDLE, ENIE
STREET ADDRESS 842 SCHOMER AVE
CITY-ST-ZIP PALM BAY FL 32908

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME SEAWARD, GAY
STREET ADDRESS 599 FERN AVE NE
CITY-ST-ZIP PALM BAY FL 32907

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME SWAHLAN, SUSAN
STREET ADDRESS 582 PONDEROSA ST
CITY-ST-ZIP MELBOURNE FL 32904

TITLE ☐ Change ☐ Addition
NAME ~~Susan Swahlan~~
STREET ADDRESS ~~582 Ponderosa St.~~
CITY-ST-ZIP ~~Melbourne, FL 32904~~

TITLE PD ☒ Delete
NAME TAYLOR, JOHN
STREET ADDRESS 370 RIO LANE
CITY-ST-ZIP INDIALANTIC FL 32903

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

John Taylor, President

4/29/2002

321-
777-7449

CR2E037 (9/01)