

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90281 010 \*\*\*\*61.25

<b>DOCUMENT # N01000001641</b>					
<b>1. Entity Name</b> WEST MELBOURNE ELEMENTARY NONPROFIT CORPORATION					
<b>Principal Place of Business</b> 2255 MEADOWLANE AVE MELBOURNE, FL 32904			<b>Mailing Address</b> 2255 MEADOWLANE AVE MELBOURNE, FL 32904		
<b>2. Principal Place of Business</b>		<b>3. Mailing Address</b>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	<b>4. FEI Number</b> 59-3705777	
<b>5. Certificate of Status Desired</b> <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
<b>6. Name and Address of Current Registered Agent</b>  STEPP, JANICE 680 CARRIAGE HILL ROAD MELBOURNE, FL 32940			<b>7. Name and Address of New Registered Agent</b>  Name  Street Address (P.O. Box Number is Not Acceptable)  City  <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
<b>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. I am familiar with, and accept the obligations of registered agent.</b>					
<b>SIGNATURE</b>		JANICE M STEPP		4/20/05	
(NOTE: Registered Agent signature required when reinstating)		DATE			
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		<b>9. Election Campaign Financing</b> Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
<b>TITLE</b> PD	<b>NAME</b> STEPP, JANICE	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 680 CARRIAGE HILL ROAD	MELBOURNE, FL 32940		<b>STREET ADDRESS</b>	D SUSAN KAWA 1824 SABAL PALM DRIVE MELBOURNE, FL 32934	
<b>CITY-ST-ZIP</b> MELBOURNE, FL 32940	<input checked="" type="checkbox"/> Delete		<b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> SD	<b>NAME</b> ROTH, ADRIENNE	<input checked="" type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 633 DESOTO LANE	INDIAN HARBOUR BEACH, FL 32937		<b>STREET ADDRESS</b>	B BARBARA SCHADING 4172 COLLINGWOOD DRIVE MELBOURNE, FL 32901	
<b>CITY-ST-ZIP</b> INDIAN HARBOUR BEACH, FL 32937	<input type="checkbox"/> Delete		<b>CITY-ST-ZIP</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>TITLE</b> TD	<b>NAME</b> PIERCE, VALERIE	<input type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 1833 WOODBERRY CIRCLE	MELBOURNE, FL 32935		<b>STREET ADDRESS</b>	SD	
<b>CITY-ST-ZIP</b> MELBOURNE, FL 32935	<input checked="" type="checkbox"/> Delete		<b>CITY-ST-ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> VD	<b>NAME</b> SALBERG, DUKE	<input checked="" type="checkbox"/> Delete	<b>TITLE</b>	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 1824 SABAL PALM DRIVE	MELBOURNE, FL 32934		<b>STREET ADDRESS</b>	V D	
<b>CITY-ST-ZIP</b> MELBOURNE, FL 32934	<input type="checkbox"/> Delete		<b>CITY-ST-ZIP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>TITLE</b> VD	<b>NAME</b> UBER, BOB	<input type="checkbox"/> Delete	<b>TITLE</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
<b>STREET ADDRESS</b> 859 GERA AVENUE NW	PALM BAY, FL 32907		<b>STREET ADDRESS</b>	COARD, BUDDY	
<b>CITY-ST-ZIP</b> PALM BAY, FL 32907	<input type="checkbox"/> Delete		<b>CITY-ST-ZIP</b>	1605 PGA BLVD. MELBOURNE, FL 32935	
<b>TITLE</b> VD	<b>NAME</b> COARD, BUDDY	<input type="checkbox"/> Delete	<b>TITLE</b>	MELBOURNE, FL 32935	
<b>STREET ADDRESS</b> 1605 PGA BLVD.	MELBOURNE, FL 32935		<b>STREET ADDRESS</b>	MELBOURNE, FL 32935	
<b>CITY-ST-ZIP</b> MELBOURNE, FL 32935	MELBOURNE, FL 32935		<b>CITY-ST-ZIP</b>	MELBOURNE, FL 32935	
<b>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.</b>					
<b>SIGNATURE:</b>		JANICE M. STEPP		4/20/05 321-242-1923	
(NOTE: Registered Agent signature required when reinstating)		DATE			