


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 23, 2006 8:00 am
Secretary of State

03-23-2006 90025 046 ****61.25

DOCUMENT # N01000003659	
1. Entity Name BREVARD FLAG FOOTBALL, INC.	

Principal Place of Business 3960 S. BANANA RIVER BLVD COCOA BEACH, FL 32931	Mailing Address 3960 S. BANANA RIVER BLVD COCOA BEACH, FL 32931
---	---

50005305



01242006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3720321	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent DOUGHERTY, DENNIS 2370 PALM LAKE DRIVE MERRITT ISLAND, FL 32952

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DOUGHERTY, DENNIS <i>Delete</i> 2370 PALM LAKE DRIVE MERRITT ISLAND, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DOUGHERTY, ANDREA <i>Delete</i> 2370 PALM LAKE DRIVE MERRITT ISLAND, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HARRIS, RICHARD <i>Delete</i> 1485 VEGA AVENUE MERRITT ISLAND, FL 32953
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KENDIG, JAMES 1550 SOUTH TROPICAL TRAIL MERRITT ISLAND, FL 32952
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Deanna Runyan S.D</i> <i>Add</i> 3960 S. Banana River Blvd Cocoa Beach, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Gary Runyan T.D</i> <i>Add</i> 3960 S. Banana River Blvd Cocoa Beach, FL 32931

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: *Gary Runyan* *Gary Runyan, Treas.* *3-20-06* *321-784-4515*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #