

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 02, 2003 8:00 am
Secretary of State

05-02-2003 90745 032 ****61.25

DOCUMENT # N01000004802

1. Entity Name

BREVARD YOUTH EDUCATION BROADCASTING CORPORATION



Principal Place of Business

**31 SAPHIRE ST.
MELBOURNE FL 32904**

Mailing Address

**325 VALENCIA RD
MELBOURNE FL 32904**

2. Principal Place of Business

1220 N. Highway A1A

3. Mailing Address

Suite, Apt. #, etc.

SUITE 7

City & State

INDIALANTIC, FL

City & State

Zip

32903

Country

USA

Zip

Country

4. FEI Number **36-4500316**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**TOUSSAINT, ANTHONY
31 SAPHIRE ST.
MELBOURNE FL 32904**

7. Name and Address of New Registered Agent

Name

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

1220 N. Highway A1A -- Suite 7

City

INDIALANTIC

FL

Zip Code

32903

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

4-29-03

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **TOUSSAINT, ANTHONY**
STREET ADDRESS **31 SAPHIRE ST.**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **D** ☐ Delete
NAME **LUTZ, EARL**
STREET ADDRESS **31 SAPHIRE ST**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE **D** ☐ Delete
NAME **BENNETT, RANDY**
STREET ADDRESS **325 VALENCIA RD**
CITY-ST-ZIP **MELBOURNE FL 32904**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **1220 N. Highway A1A - Suite 7**
CITY-ST-ZIP **INDIALANTIC, FL 32903**

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

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

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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 life empowered.

SIGNATURE:

SIGNATURE REQUIRED

4-29-03

321-722-3535

CR2E037 (10/02)