

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N02000002402

FILED  
Apr 30, 2003  
Secretary of State

**Entity Name:** SPACE COAST FLORIDA MOTION PICTURE AND TELEVISION ASSOCIATION INC.

## Current Principal Place of Business:

6249 SDLEEPY HOLLOW DR  
TITUSVILLE, FL 32780

## New Principal Place of Business:

P.O. BOX 703  
CAPE CANAVERAL, FL 32920

## Current Mailing Address:

6249 SDLEEPY HOLLOW DR  
TITUSVILLE, FL 32780

## New Mailing Address:

P.O. BOX 703  
CAPE CANAVERAL, FL 32920

FEI Number: 59-2301231

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOOHER, JAMES E  
6249 SDLEEPY HOLLOW DR  
TITUSVILLE, FL 32780

## Name and Address of New Registered Agent:

CROMER, JOAN H  
P.O. BOX 703  
CAPE CANAVERAL, FL 32920

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: JOAN H. CROMER

04/30/2003

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: BOOHER, JAMES E  
Address: 6249 SDLEEPY HOLLOW DR  
City-St-Zip: TITUSVILLE, FL 32780

Title: EVD ( ) Delete  
Name: JACKSON, MELODY  
Address: 1155 N COURTENAY PKWY APT A103  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: STD ( ) Delete  
Name: CASTLE, CHAROLTTE  
Address: 6249 SDLEEPY HOLLOW DR  
City-St-Zip: TITUSVILLE, FL 32780

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: CROMER, JOAN H  
Address: P.O. BOX  
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: EVD (X) Change ( ) Addition  
Name: VARADY, MARY  
Address: 615 SW TEJON AVE  
City-St-Zip: PALM BAY, FL 32908

Title: VPD (X) Change ( ) Addition  
Name: BARKER, JAMES  
Address: 2800 HIAWATHA AVE, LOT #28  
City-St-Zip: PALM BAY, FL 32905

Title: TD ( ) Change (X) Addition  
Name: JACKSON, MELODY  
Address: 1155 N COURTENAY PKWY. APT. F103  
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JOAN H. CROMER

PD

04/30/2003

Electronic Signature of Signing Officer or Director

Date