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2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT				Jun 05, 2008 8:00 at Secretary of State
DOCUMEN,T # N0200005546 1. Entity Name SOUTH BREVARD GOLF ASSOCIATION, INC.	•/ *			05-01-2008 90192 047 ****61.25
Principal Place of Business Mailing Address				

121 E. HIBISCUS BLVD. 121 E. HIBISCUS BLVD. 66013470 MELBOURNE, FL 32901 MELBOURNE, FL 32901 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01042008 Chg-NP CR2E037 (12/06) City & State 4. FEI Number 03-1967986 City & State Applied For Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 8. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent SELF, JAMES H 121 E. HIBISCUS BLVD. Street Address (P.O. Box Number is Not Acceptable) MELBOURNE, FL, 32901 City Zip Code 6. 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 em familiar with, and accept the obligations of registered agent. e, SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE Make check payable to Filing Fee'is \$61.25 9. Election Campaign Financing \$5.00 May Be Due by May 1, 2008 --- Trust Fund Contribution. Florida Department of State Added to Fees 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. PD Delete TITLE TITLE ■ Addition Change SANFORD, ALBERT M MALE NAME STREET ADDRESS 221 NESBITT ST., NE STREET ADDRESS CITY-ST-ZIP PALM BAY, FL 32907 CITY-ST-ZIP TITLE D Delete TITLE ☐ Change ☐ Addition BLEVINS, JAMES R NAME NAME STREET ADDRESS 1399 MEADOWBROOK RD., NE STREET ADDRESS PALM BAY, FL 32905 CITY-ST-ZIP CITY-ST-7P TITLE Delete NILE ☐ Change ☐ Addition SELF, JAMES H HAME تندن STREET ADDRESS 121 E. HIBISCUS BLVD. STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32901 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition MALE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Deleta TITLE ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE Change : - O Addition Carry St. St. Berger, NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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 517, 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: _	SIGNATURE AND TYPED OR PRINTED NAME OF TO	71 78		
	PRINCE INC WED LINED ON ANIMIED WORLOW BID	MINGOPPICER OR DIRECTOR	Date	Daysme Phone 6