

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005880

Entity Name: SPACE COAST ROCKETS, INC.

FILED
Apr 30, 2004
Secretary of State

Current Principal Place of Business:

720 SAINT CLAIR STREET
MELBOURNE, FL 32935

New Principal Place of Business:

Current Mailing Address:

720 SAINT CLAIR STREET
MELBOURNE, FL 32935

New Mailing Address:

FEI Number: 27-0042322

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BELL, CATHERINE
720 SAINT CLAIR STREET
MELBOURNE, FL 32935

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: FLICK, BRIAN
Address: 1820 WASHINGTON AVENUE
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: CONRADIS, GILBERT E
Address: 525 IMPERIAL AVENUE
City-St-Zip: MELBOURNE, FL 32935

Title: D () Delete
Name: CHAVEZ, GLORIA
Address: 1020 GENEVIEVE AVENUE
City-St-Zip: ROCKLEDGE, FL 32955

Title: P () Delete
Name: BISHOP, KRIS
Address: 2690 BISHOP LANE
City-St-Zip: W. MELBOURNE, FL 32904

Title: S () Delete
Name: ADAMS, CYNTHIA
Address: 2101 LANSING STREET
City-St-Zip: MELBOURNE, FL 32935

Title: T () Delete
Name: BELL, CATHERINE
Address: 720 SAINT CLAIR STREET
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: CHRISTINE, FLICK
Address: 1820 WASHINGTON AVENUE
City-St-Zip: MELBOURNE, FL 32935

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: CATHERINE BELL

T

04/30/2004

Electronic Signature of Signing Officer or Director

Date