2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 27, 2002 8:00 am
Secretary of State
02-27-2002 90027 018 ****61.25

DOCUMENT # N02212

1. Entity Name

FREEDOM SEVEN SENIOR CITIZENS COMMUNITY CENTER, INC.

Principal Place of Business	Mailing Address
1325 N ATLANTIC AVE STE 170 COCOA BEACH FL 32931 US	PO BOX 321203 COCOA BEACH FL 32932-1203 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Same As Place of Business. P.O. Box Closed
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2423206 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MORGAN, JOSEPH R 580 S. BREVARD AVE. #815 COCOA BEACH FL 32931	Name: Carolyn Whiteaker Street Address (P.O. Box Number is Not Acceptable): 151 Riverside DR. City: Cape Canaveral FL Zip Code: 32920

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.

SIGNATURE: Carolyn Whiteaker, Center Coordinator Carolyn Whiteaker DATE: 2-4-02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FRITZ, ROBERT J BERMUDA RD. COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Tracy Andrews 301 N. Atlantic Ave., #204 Cocoa Beach, Fl. 32931	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MD MORGAN, JOSEPH R 580 S BREVARD, 815 COCOA BEACH FL 32931	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WANSTREET, PAUL 3450 OCEAN BEACH BLVD. #505 COCOA BEACH FL 32931	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD HALLOCK, MARY 1611 MINUEMAN CSWY. #110 COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD CLEVELAND, ALBERT 377 DORSET DR. COCOA BEACH FL 32931	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

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 like empowered.

SIGNATURE: Tracy Andrews TD TRACY ANDREWS 2-11-01 321-784-2313