

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007349

FILED  
Mar 04, 2008  
Secretary of State

**Entity Name:** SPACE COAST HUMAN RESOURCE ASSOCIATION, INC.

**Current Principal Place of Business:**

227ANNALISA PLACE  
MERRITT ISLAND, FL 32953

**New Principal Place of Business:**

2785 TUSCARORA COURT  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

P.O. BOX 541590  
MERRITT ISLAND, FL 32954

**New Mailing Address:**

**FEI Number:** 76-0800712

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

ROBERTS, KATHY  
227 ANNALISA PL  
MERRITT ISLAND, FL 32953 US

**Name and Address of New Registered Agent:**

SNYDER, TINA M  
2785 TUSCARORA COURT  
WEST MELBOURNE, FL 32904 US

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: TINA M. SNYDER

03/04/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: ROBERTS, KATHY  
Address: 227 ANNALISA PL  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: S ( ) Delete  
Name: LOUFEK, MICHELLE  
Address: 150 N. SYKES CREEK PKWY, STE 200  
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T ( ) Delete  
Name: BEERMAN, TED  
Address: PO BOX 656  
City-St-Zip: CAPE CANAVERAL, FL 32920

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PRES (X) Change ( ) Addition  
Name: SNYDER, TINA M  
Address: 2785 TUSCARORA COURT  
City-St-Zip: WEST MELBOURNE, FL 32904

Title: SEC (X) Change ( ) Addition  
Name: SIMMONS, CARLA  
Address: 18 HARRISON STREET  
City-St-Zip: COCOA, FL 32922

Title: TRES (X) Change ( ) Addition  
Name: BEERMAN, TED  
Address: 461 3RD AVENUE  
City-St-Zip: SATELLITE BEACH, FL 32937

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: TINA M. SNYDER

PRES

03/04/2008

Electronic Signature of Signing Officer or Director

Date