

**2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

**FILED  
Oct 06, 2005  
Secretary of State**

DOCUMENT# N04317

Entity Name: SOUTH BREVARD AUTOMOBILE DEALERS ASSOCIATION, INC.

**Current Principal Place of Business:**

625 E NASA BV  
MELBOURNE, FL 32901 US

**New Principal Place of Business:**

**Current Mailing Address:**

625 E NASA BV  
MELBOURNE, FL 32901 US

**New Mailing Address:**

FEI Number: 59-2430607      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

OSMAN, PERRY  
625 E NASA BV  
MELBOURNE, FL 32901 US

**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: PERRY OSMAN

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: OSMAN, PERRY  
Address: 625 E. NASA BLVD.  
City-St-Zip: MELBOURNE, FL

Title: STD ( ) Delete  
Name: MURPHY, TOM  
Address: 174 HIBISCUS BV  
City-St-Zip: MELBOURNE, FL 32901

Title: VD ( ) Delete  
Name: OSMAN, PAUL  
Address: 625 E. NASA BLVD.  
City-St-Zip: MELBOURNE, FL

**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:

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: PERRY OSMAN

Electronic Signature of Signing Officer or Director

PD

10/06/2005

Date