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CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 27 PM 3:16

DOCUMENT # N04740 (9)

1. Corporation Name
SOUTH BREVARD AMATEUR RADIO CLUB, INCORPORATED

Principal Place of Business	Mailing Address
PO BOX 2205 MELBOURNE FL 32902-2205	PO BOX 2205 MELBOURNE FL 32902-2205

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 08/17/1984
3a. Date of Last Report: 02/25/1994
4. FEI Number: 59-2455310 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

LUNDY, LAWRENCE H.
446 SANDPIPER DRIVE
SATELLITE BEACH FL 32937

10. Name and Address of New Registered Agent

81 Name: TAYLOR, JOHN P.
82 Street Address (P.O. Box Number is Not Acceptable): 991 WAIALAE CIR. N.E.
83
84 City: PALM BAY FL 85 Zip Code: 32905

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: J. P. Taylor DATE
Signature, printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when executing)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	TUCKER, HAROLD J.	12 NAME	
STREET ADDRESS	4200 S. A1A	13 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE BEACH FL	14 CITY-ST-ZIP	
TITLE	PD	21 TITLE	PD ☒ Change ☐ Addition
NAME	LUNDY, LAWRENCE	22 NAME	TAYLOR, JOHN P.
STREET ADDRESS	446 SANDPIPER DR	23 STREET ADDRESS	991 WAIALAE CIR.,N.E.
CITY-ST-ZIP	SATELLITE BEACH FL	24 CITY-ST-ZIP	PALM BAY, FL. 32905
TITLE	SD	31 TITLE	SD ☒ Change ☐ Addition
NAME	TUCKER, ROSETTE H.	32 NAME	BELL, GEORGE M.
STREET ADDRESS	4200 S. A1A	33 STREET ADDRESS	630 GEORGIA AVE.
CITY-ST-ZIP	MELBOURNE FL	34 CITY-ST-ZIP	MELBOURNE, FL.32940
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	MCGUIRE, FRANK	42 NAME	
STREET ADDRESS	105 E PRIMROSE LANE	43 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	KELLY, THOMAS	52 NAME	
STREET ADDRESS	3136 ALABAMA DR.	53 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: J. P. Taylor JOHN P. TAYLOR 2/7/95 (407)724-2700
SIGNATURE AND TYPED OR PRINTED NAME OF MAKING OFFICER OR DIRECTOR — Date — Daytime Phone #

084744