2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2005
Secretary of State

DOCUMENT# N04740

Entity Name: SOUTH BREVARD AMATEUR RADIO CLUB, INCORPORATED

Current Principal Place of Business:

PO BOX 2205
MELBOURNE, FL 329022205

New Principal Place of Business:

Current Mailing Address:

PO BOX 2205
MELBOURNE, FL 329022205

New Mailing Address:

FEI Number: 59-2455310 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SCHULTZ, DONALD
598 VIOLET AVE NE
PALM BAY, FL 32907 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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: SCHULTZ, DONALD
Address: 598 VIOLET AVE NE
City-St-Zip: PALM BAY, FL 32907

Title: S ( ) Delete
Name: LEAKE, JOAN
Address: 762 LYNBROOK ST NW
City-St-Zip: PALM BAY, FL 32907

Title: T ( ) Delete
Name: CLEMENTE, DANIEL J.
Address: 550 MINOR AVENUE NE
City-St-Zip: PALM BAY, FL 32907

Title: D ( ) Delete
Name: LEAKE, MARTIN
Address: 762 LYNBROOK STREET NW
City-St-Zip: PALM BAY, FL 32907

Title: VP ( ) Delete
Name: NEWKIRK, WILLIAM
Address: 3151 S BABCOCK ST #70
City-St-Zip: MELBOURNE, FL 32901

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: SCHULTZ, DONALD
Address: 598 VIOLET AVE NE
City-St-Zip: PALM BAY, FL 32907

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: PD (X) Change ( ) Addition
Name: MCMILLEN, GERALD
Address: 2880 N. WICKHAM RD APT 402
City-St-Zip: MELBOURNE, FL 32935

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: DANIEL J. CLEMENTE T 02/28/2005

Electronic Signature of Signing Officer or Director — Date