

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N04870

1. Entity Name

NORTH BREVARD OFFICIALS ASSOCIATION, INC.

**FILED**  
**Apr 11, 2001 8:00 am**  
**Secretary of State**

04-11-2001 90113 042 \*\*\*\*61.25

Principal Place of Business

1065 N. CARPENTER ROAD  
TITUSVILLE FL 32796  
US

Mailing Address

1065 N. CARPENTER ROAD  
TITUSVILLE FL 32796  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2421721

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

CLARK, RICKY L  
1065 N CARPENTER ROAD  
TITUSVILLE FL 32796

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**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

TITLE PD  
NAME RAUB, DAVID C.  
STREET ADDRESS 1560 QUAIL CT  
CITY-ST-ZIP TITUSVILLE FL 32796 ☒ Delete

TITLE SD  
NAME FEE, SANDI  
STREET ADDRESS 4770 COCONUT DRIVE  
CITY-ST-ZIP TITUSVILLE FL 32780 ☒ Delete

TITLE VPD  
NAME CLARK, RICK  
STREET ADDRESS 1065 N CARPENTER RD  
CITY-ST-ZIP TITUSVILLE FL 32796 ☒ Delete

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD  
NAME RICKY CLARK  
STREET ADDRESS 1065 N. Carpenter Rd  
CITY-ST-ZIP Titusville, FL 32796 ☐ Change ☒ Addition

TITLE ~~Pat GORMAN~~  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VPD  
NAME Pat Gorman  
STREET ADDRESS 1556 Quail Court  
CITY-ST-ZIP Titusville, FL 32796 ☐ Change ☒ Addition

TITLE SD  
NAME Gail Clark  
STREET ADDRESS 1065 N. Carpenter Rd  
CITY-ST-ZIP Titusville, FL 32796 ☐ Change ☒ Addition

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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: *Ricky Clark* RICKY CLARK

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-01

Date

321-861-6260

Daytime Phone #

CR2E037 (10/00)