

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04870

FILED
May 11, 2005
Secretary of State

Entity Name: NORTH BREVARD OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

1065 N. CARPENTER ROAD
TITUSVILLE, FL 32796 US

New Principal Place of Business:

Current Mailing Address:

1065 N. CARPENTER ROAD
TITUSVILLE, FL 32796 US

New Mailing Address:

FEI Number: 59-2421721 **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:

Name and Address of New Registered Agent:

CLARK, RICKY L
1065 N CARPENTER ROAD
TITUSVILLE, FL 32796 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CLARK, RICKY
Address: 1065 N CARPENTER RD
City-St-Zip: TITUSVILLE, FL 32796

Title: VPD () Delete
Name: CRIZZER, KENNEDY
Address: 600 HANOVER DR
City-St-Zip: TITUSVILLE, FL 32780

Title: SD () Delete
Name: CLARK, GAIL
Address: 1065 N CARPENTER RD
City-St-Zip: TITUSVILLE, FL 32796

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: GAIL CLARK

SD

05/11/2005

Electronic Signature of Signing Officer or Director

Date