

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05630

Entity Name: BREVARD USER'S GROUP, INC.

FILED  
Apr 15, 2004  
Secretary of State

**Current Principal Place of Business:**

P.O. BOX 2456  
MELBOURNE, FL 329022456

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2456  
MELBOURNE, FL 329022456

**New Mailing Address:**

FEI Number: 50-4469397

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

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

RYMER, GEORGE  
117 OCEAN BREEZE CIRCLE  
INDIALANTIC, FL 329032731 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: RYMER, GEORGE  
Address: 117 OCEAN BREEZE CIRCLE  
City-St-Zip: INDIALANTIC, FL 329032731

Title: VPD ( ) Delete  
Name: ARNOLD, ERIC A  
Address: 1864 OAKWOOD TRAILS  
City-St-Zip: MELBOURNE, FL 32934

Title: SD ( ) Delete  
Name: GRANT, MARY ALICE  
Address: 3010 KERSHAW CT  
City-St-Zip: MELBOURNE, FL 32934

Title: TD ( ) Delete  
Name: GLASER, THEODORE  
Address: 582 SANDERLING DR., APT UB  
City-St-Zip: INDIALANTIC, FL 329033416

Title: D ( ) Delete  
Name: HIXON, DAVID  
Address: P.O. BOX 360957  
City-St-Zip: MELBOURNE, FL 32936

Title: D ( ) Delete  
Name: TOWNSEND, JAMES  
Address: 1406 FLORENCE ST  
City-St-Zip: MALABAR, FL 32950

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VPD (X) Change ( ) Addition  
Name: NASH, JACK H  
Address: 2751 ROUEN AVE  
City-St-Zip: MELBOURNE, FL 329358751

Title: SD (X) Change ( ) Addition  
Name: HEFTER, JOAN  
Address: 340 WICKHAM LAKES DR  
City-St-Zip: VIERRA, FL 329402209

Title: TD (X) Change ( ) Addition  
Name: LEHOTSKY, PETER K  
Address: PO BOX 100598  
City-St-Zip: PALM BAY, FL 329100598

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: WOJNAR, THOMAS  
Address: PO BOX 61001  
City-St-Zip: PALM BAY, FL 329061001

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: PETER K LEHOTSKY

DT

04/15/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date