

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008296

FILED
Jan 11, 2007
Secretary of State

Entity Name: SPACE COAST BUSINESS GUILD INC.

Current Principal Place of Business:

5410 MURRELL RD - STE 205-01
VIERA, FL 32955

New Principal Place of Business:

8501 ASTRONAUT BLVD
5-202
CAPE CANAVERAL, FL 32920

Current Mailing Address:

5410 MURRELL RD - STE 205-01
VIERA, FL 32955

New Mailing Address:

P.O. BOX 562773
ROCKLEDGE, FL 32955

FEI Number: 20-5263023

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, AUSTIN B
8501 ASTRONAUT BLVD
5-202
CAPE CANAVERAL, FL 32920 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: P () Delete
Name: SMITH, AUSTIN B
Address: 8501 ASTRONAUT BLVD - # 5-202
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: VP () Delete
Name: RIVERA, JASON D
Address: 1152 BRUMPTON PL
City-St-Zip: VIERA, FL 32955

Title: S () Delete
Name: CONSTANT, DEE
Address: 875 N COURTNEY PKWY
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T () Delete
Name: SEAYTANT, JERRY
Address: P O BOX 120748
City-St-Zip: W MELBOURNE, FL 32912

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:

Title: T (X) Change () Addition
Name: SEAY, JERRY REV.
Address: P O BOX 120748
City-St-Zip: W MELBOURNE, FL 32912

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: AUSTIN B. SMITH

P

01/11/2007

Electronic Signature of Signing Officer or Director

Date