

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012300

FILED
Feb 05, 2008
Secretary of State

Entity Name: BREVARD COUNTY FAIR, INC.

Current Principal Place of Business:

3695 LAKE DRIVE
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

3695 LAKE DRIVE
COCOA, FL 32926

New Mailing Address:

FEI Number: 20-8058407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARNES, BILL
310 5TH AVE
INDIALANTIC, FL 32903 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: SULLIVAN, FRANK
Address: 3695 LAKE DR
City-St-Zip: COCOA, FL 32926

Title: VP () Delete
Name: KEMPFER, BILLY
Address: 3695 LAKE DR
City-St-Zip: COCOA, FL 32926

Title: T () Delete
Name: BARNES, BILL
Address: 3695 LAKE DR
City-St-Zip: COCOA, FL 32926

Title: T () Delete
Name: SMURL, MICHELLE
Address: 3695 LAKE DR
City-St-Zip: COCOA, FL 32926

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: S (X) Change () Addition
Name: BARNES, ARLENE
Address: 3695 LAKE DR
City-St-Zip: COCOA, FL 32926

I hereby certify that the information supplied with this filing does not qualify 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: ARLENE BARNES

S

02/05/2008

Electronic Signature of Signing Officer or Director

Date