

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sand ~~to~~ ~~the~~ ~~Secretary of State~~
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N07934** (5)

1. Corporation Name

BREVARD ASSOCIATION OF MINIATURISTS, INC.

600001778026
-04/12/96--01021--012
***61.25



Principal Place of Business

Mailing Address

**430 MICHIGAN AVE.
P.O. BOX 372739
SATELLITE BEACH FL 32937-7739**

**430 MICHIGAN AVE.
P.O. BOX 372739
SATELLITE BEACH FL 32937-7739**

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MCCANN, JACK
5434 JAMAICA RD
COCOA FL 32927**

81

Name

Cotter, Dorothy

82

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

192 S.E. 4th St

83

84

City

Satellite Beach FL

85 Zip Code

32937

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Dorothy Cotter

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

(NOTE: Registered Agent signature required when reinstating)

DATE

3-19-96

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	MCCANN, JACK	
STREET ADDRESS	5434 JAMAICA RD	
CITY-ST-ZIP	COCOA FL	
TITLE	V	DELETE
NAME	MILLER, CAROLE	
STREET ADDRESS	7021 RODES PLACE	
CITY-ST-ZIP	W. MELBOURNE FL	
TITLE	V	DELETE
NAME	BREON, ROBERT	
STREET ADDRESS	1624 DIXIE WAY	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	DT	DELETE
NAME	BRENNAN, LOUISE	
STREET ADDRESS	360 CARISSA DR	
CITY-ST-ZIP	SATELLITE BCH FL	
TITLE	DS	DELETE
NAME	MYERS, IVA	
STREET ADDRESS	642 XAVIER AVE	
CITY-ST-ZIP	MELBOURNE FL	
TITLE	D	DELETE
NAME	COTTER, DOROTHY	
STREET ADDRESS	192 SE 4TH ST	
CITY-ST-ZIP	SATELLITE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	P	Change	Addition
1.2 NAME	Cotter, Dorothy		
1.3 STREET ADDRESS	192 SE 4th St		
1.4 CITY-ST-ZIP	Satellite Beach FL		
2.1 TITLE	V	Change	Addition
2.2 NAME	Myers, Iva		
2.3 STREET ADDRESS	642 Xavier Ave.		
2.4 CITY-ST-ZIP	Melbourne, FL		
3.1 TITLE	2nd V	Change	Addition
3.2 NAME	Brennan, Louise		
3.3 STREET ADDRESS	360 Carissa Dr.		
3.4 CITY-ST-ZIP	Satellite Beach, FL		
4.1 TITLE	DT	Change	Addition
4.2 NAME	Little, Vicki		
4.3 STREET ADDRESS	761 First Ave.		
4.4 CITY-ST-ZIP	Satellite Beach, FL		
5.1 TITLE	DS	Change	Addition
5.2 NAME	Hierbaum, Joan R.		
5.3 STREET ADDRESS	1290 Harbor Town Cir.		
5.4 CITY-ST-ZIP	Melbourne, FL		
6.1 TITLE	D	Change	Addition
6.2 NAME	Gailey, Dolores		
6.3 STREET ADDRESS	1607 Parkside Pl.		
6.4 CITY-ST-ZIP	Indian Harbour Bch FL		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Dorothy Cotter
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/96
Date

407-777-0385
Daytime Phone #

CR2E037 (12/95)