FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N08047

1. Corporation Name

MELBOURNE INDEPENDENT C.B. RADIO CLUB, INC.

Principal Place of Business 302 LANACK ROAD SE

Mailing Address

Zip

29

23 Zip

24

302 LANACK ROAD SE



02-19-1999 90110 038 ****70.00

Fee Required

\$5.00 May Be

Added to Fees

US	US	
Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed 03/08/1985
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number Applied For NOT-APPLICABLE Not Applicable
City & State	City & State	5. Certificate of Status Desired \$8.75 Additional

Country

30

9. Name and Address of Current Registered Agent

Country

25

SEYMOUR, DOROTHY M.
302 LANACK ROAD SE
PALM BAY FL 32909

	10. Name and Address of New Registered Agent								
81	Name Same								
82	Street Address (P.O. Box Number is Not Acceptable)	!		_					
83									
84	City	85	Zin Code	_					

6. Election Campaign Financing

Trust Fund Contribution

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 r	egistered agent, or both, in the State of Florida. Such change was a m [amiliar with, and accept the obligations of, Section 617.0503, Flo	authorized by the corpo orida Statutes.	, , , , , , , , , , , , , , , , , , , ,		gistered	
SIGNATURE	Adverte Garden 110		2/3/99	9	l	
SIGNATURE		: Registered Agent signature re	equired when reinstating) DATE			
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	P DELETE	1.1 TITLE		Change	☐ Addition	
NAME	HALL, DON	1.2 NAME		,		
STREET ADDRESS	1301 MIT CT NE	1.3 STREET ADDRESS	Same			
CITY-ST-ZIP	PALM BAY FL	1.4 CITY-ST-ZIP				
TITLE	D DELETE	2.1 TITLE		Change	☐ Addition	
NAME	STARLING, GROVER	2.2 NAME	0			
STREET ADDRESS	501 CORNELL AVE	2.3 STREET ADDRESS	Same			
CITY-ST-ZIP	MELBOURNE FL 32901	2.4 CITY-ST-ZIP				
TITLE	\$ DELETE	3.1 TITLE		☐ Change	☐ Addition	
NAME	KIRKLAND, VALERIE	3.2 NAME	0			
STREET ADDRESS	1905 ELDERBERRY CT NE	3.3 STREET ADDRESS	Same		}	
CITY-ST-ZIP	PALM BAY FL	3.4. CITY-ST-ZIP	\mathcal{J}	,	ŀ	
TITLE	T □ DELETE	4.1 TITLE		☐ Change	☐ Addition	
NAME	HARVEY, MARY	4.2 NAME				
STREET ADDRESS	1916 MOSSWOOD DR	4.3 STREET ADDRESS	Same			
CITY-ST-ZIP	MELBOURNE FL	4,4 CITY-ST-ZIP				
TITLE	D DELETE	5.1 TITLE		Change	☐ Addition	
NAME	PETTY, GLENN	5.2 NAME			1	
STREET ADDRESS	2555 NE THIRD AVE	5.3 STREET ADDRESS	Same		,	
CITY-ST-ZIP	PALM BAY FL 32905	5.4 CITY-ST-ZIP) w	. :	. [
TITLE	VP □ DELETE	6.1 TITLE		Change	Addition	
NAME	SEYMOUR, DOROTHY	6.2 NAME	0			
070557 4000600	202 LAMACK DD CE	6 2 CTREET ADDRESS	S NAME			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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, with all other like empowered.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

PALM BAY FL