



2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90099 012 ****61.25

DOCUMENT # N08485 1. Entity Name FLORIDA SPACE COAST COUNCIL FOR INTERNATIONAL VISITORS, INC.					
Principal Place of Business C/O FERNANDO M. PALACIOS 525 E. STRAWBRIDGE AVE. MELBOURNE, FL 32901 US			Mailing Address PO BOX 2621 MELBOURNE, FL 32902 US		
2. Principal Place of Business C/O RICHARD Tweed Suite, Apt. #, etc. 444 NAISH AVE.		3. Mailing Address P.O. Box 406 Suite, Apt. #, etc.		40030607 	
City & State COCOA BEACH, FL		City & State CAPE CANAVERAL, FL		4. FEI Number 59-2635130	
Zip 32931		Country US		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MARCOTTE, MARGARET C 455 GENESSEE AVE INDIALANTIC, FL 32903				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE VP NAME NELMS, LINDA STREET ADDRESS 1076 ACAPPELLA DR CITY-ST-ZIP MELBOURNE, FL 32940	<input checked="" type="checkbox"/> Delete		TITLE VP NAME SHURTLEFF, MARIE-LOUISE GRUNDY STREET ADDRESS 608 TORTOISE WAY CITY-ST-ZIP SATellite BEACH, FL 32937	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE TD NAME MARCOTTE, MARGARET STREET ADDRESS 455 GENESSEE AVENUE CITY-ST-ZIP INDIALANTIC, FL 32903	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE D NAME LOWERY, DORINDA STREET ADDRESS 1 WEST POINTE DRIVE CITY-ST-ZIP COCOA BEACH, FL 32931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE P NAME TWEED, RICHARD STREET ADDRESS 44 NAISH AVE CITY-ST-ZIP COCOA BEACH, FL 32931	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 444 NAISH AVE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE SD NAME HIRSCH, DEBRA STREET ADDRESS 2875 PENNSYLVANIA ST CITY-ST-ZIP MELBOURNE, FL 32904	<input type="checkbox"/> Delete		TITLE D NAME STREET ADDRESS CITY-ST-ZIP 125 MACAW LANE MERRITT ISLAND, FL 32952	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE ED NAME MARCOTTE, STUART W STREET ADDRESS 455 GENESSEE AVE CITY-ST-ZIP INDIALANTIC, FL 32903	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: MARGARET C. MARCOTTE MARGARET C. MARCOTTE, Treasurer <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
4/17/06 321-951-3319 <small>Date Daytime Phone #</small>					