FILED 2002 UNIFORM BUSINESS REPORT (UBR) Feb 20, 2002 8:00 am Secretary of State DOCUMENT # N10525 Entity Name BREVARD SMALL BUSINESS ASSISTANCE COUNCIL, INC. 02-20-2002 90156 022 ****61.25 rincipal Place of Business Mailing Address Of S. HARBOR CITY BLVD. 1901 S. HARBOR CITY BLVD. **60079219** VE HARBOR PLACE. SUITE 805 ONE HARBOR PLACE. SUITE 805 **ELBOURNE FL 32901** MELBOURNE FL 32901 Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2567195 Not Applicable Zip Country Country \$8.75 Additional . .. 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name WEISS, KURT C Street Address (P.O. Box Number is Not Acceptable) 1901 S. HARBOR CITY BLVD. ONE HARBOR PLACE, STE. 805 MELBOURNE FL 32901 City Zip Code 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. GNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be Make Check Payable to **FILE NOW: FEE IS \$61.25** 4 Trust Fund Contribution. Added to Fees Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. ☐ Delete TITLE ☐ Addition BRADLEY, DEBORAH ME NAME 215 BAYTREE DR. SUITE 215 REET ADDRESS STREET ADDRESS Y-ST-ZIP **MELBOURNE FL 32940** CITY-ST-ZIP ۷D İF Delete TITLE ☐ Change ☐ Addition PFRIMMER, SANDY ME NAME .1005 E.STRAWBRIDGE AVE REET ADDRESS STREET ADDRESS Y-ST-ZIP **MELBOURNE FL 32901** CITY-ST-7IP Neil Mullins TITLE Delete KRIGELMAN, DAVE NAME 2000 West NASA Blud RET ADDRESS 813 CEBU PLACE STREET ADDRESS - ST- 7IP **MELBOURNE FL 32940** CITY-ST-ZIP Melbourne, FL 32902 ☐ Delete TITLE ☐ Change Addition Curtis Satter thylaite Headquarters Blog., Room 3153 NAME EET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Addition NAME EET ADDRESS STREET ADDRESS Y-ST-ZIP CITY-ST-ZIP

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 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.

STREET ADDRESS

CITY-ST-7IP

TITLE

NAME

GNATURE:

IEET ADDRESS

-ST-ZIP

Would Bradley Y

☐ Delete

1/30/02 321-255-0088

☐ Change

Addition

CR2E03