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2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 27, 2002 8:00 am
Secretary of State
05-21-2002 91175 016 ****61.25

DOCUMENT # N14372

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DO NOT WRITE IN THIS SPACE

1. Entity Name

FILIPINO-AMERICAN ASSOCIATION OF BREVARD COUNTY, FLORIDA, INC.

Principal Place of Business	Mailing Address
1505 PAISLEY ST NW PALM BAY FL 32907 US	1505 PAISLEY ST NW PALM BAY FL 32907 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-3063767 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
LIM, LETICIA 1505 PAISLEY ST NW PALM BAY FL 32907	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.

SIGNATURE Leticia M. Lim 4-13-02

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LIM, LETICIA 1505 PAISELY ST. NW PALM BAY FL 32907	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MARIVA HARRIS 6315 MACAULEY AVE COCOA, FL 32928	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T WADE, NORA 130 VIN ROSE CR SE PALM BAY FL 32909	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T FAYE P. DAY 1641 WILLARD RD NW PALM BAY, FL 32907	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ZIMMERMAN, GINA 321 POLARIS DR SATELLITE BEACH FL 32937	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RUBY DE LA PAZ 3713 SECOND AVE VALKARIA, FL 32950	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D APELADO, GENE 1950 TALLRIDGE RD. MELBOURNE FL 32935	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROLANDO MENDOZA 2100 N. ATLANTIC AVE. #101 COCOA BEACH, FL 32931	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P CERDENA, LUCY 1016 MARY JOYE AVE. INDIAN HARBOUR BEACH FL 32937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MERCY CRUZ 1115 GALTY CIR NE PALM BAY, FL 32905	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARBER, LEVELYN 3864 GRAND MEADOWS BLVD. MELBOURNE FL 32934	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. 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.

SIGNATURE: Leticia M. Lim 4-13-02 321-728-2982

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #