

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14372

FILED
Apr 16, 2007
Secretary of State

Entity Name: FILIPINO-AMERICAN ASSOCIATION OF BREVARD COUNTY, FLORIDA, INC.

Current Principal Place of Business:

3234 ABBOT AVE. NE
PALM BAY, FL 32905 US

New Principal Place of Business:

650 E. STRAWBRIDGE AV.
APT. #901
MELBOURNE, FL 32901 US

Current Mailing Address:

P.O. BOX 372051
SATELLITE BEACH, FL 32937 US

New Mailing Address:

FEI Number: 59-3063767 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DE LA PAZ, ROMEO
3234 ABBOT AVE. NE
PALM BAY, FL 32905 US

Name and Address of New Registered Agent:

SNOOK, EUGENE M
650 E. STRAWBRIDGE AVE.
APT # 901
MELBOURNE, FL 32901 US

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: EUGENE M. SNOOK

04/16/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: DE LA PAZ, ROMEO
Address: 3234 ABBOT AVE. NE
City-St-Zip: PALM BAY, FL 32905

Title: V () Delete
Name: SIAN, HIRFA
Address: 1801 HARDIN LANE
City-St-Zip: PALM BAY, FL 32905

Title: S () Delete
Name: ZIMMERMAN, GINA
Address: 321 POLARIS DR.
City-St-Zip: SATELLITE BCH, FL 32937

Title: T () Delete
Name: ANGELES, MELY
Address: 317 LANTERNBACK ISLAND DRIVE
City-St-Zip: SATELLITE BEACH, FL 32937

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SNOOK, EUGENE M P
Address: 650 E. STRAWBRIDGE AVE. APT#901
City-St-Zip: MELBOURNE, FL 32901 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: EUGENE M. SNOOK

P

04/16/2007

Electronic Signature of Signing Officer or Director

Date