2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State
05-05-2003 91902 037 ****61.25

0075070

DOCUMENT # N14372

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

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
6315 MACAULEY AVE	6315 MACAULEY AVE.
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: COCOA, FL	City & State: COCOA, FL
Zip: 32926 Country: USA	Zip: 32926 Country: USA

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

LIMN, LETICIA
1505 PAISLEY ST NW
PALM BAY FL 32907

7. Name and Address of New Registered Agent

Name: MARINA HARRIS
Street Address (P.O. Box Number is Not Acceptable): 6315 MACAULEY AVE.
City: COCOA FL Zip Code: 32926

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: Marina Harris 4/30/03
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 Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V HARRIS, MARINA 6315 MACAULEY AVE COCOA FL 32426	☐ Delete	P	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T DAY, FAYE P 1641 WILLARD RD NW PALM BAY FL 32907	☒ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S ZIMMERMAN, GINA 321 POLARIS DR SATELLITE BEACH FL 32937	☐ Delete	V	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DE LA PAZ, ROMY 3713 SECOND AVE VALKARIA FL 32450	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MENDOZA, ROLANDO 2100 N ATLANTIC AVE #101 COCOA BEACH FL 32931	☐ Delete		☐ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CRUZ, MERY 115 GALTY CIR NE PALM BAY FL 32905	☒ Delete	D HIRFA SLAN 1801 HARDIN LANE PALM BAY, FL 32905	☐ Change	☐ Addition

CR2E037 (10/02)

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: SIGNATURE REQUIRED 4/30/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #