

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14573

FILED
Feb 17, 2006
Secretary of State

Entity Name: SPACE COAST PC USERS GROUP, INCORPORATED

Current Principal Place of Business:

P.O. BOX 0369
COCOA, FL 329230369

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 0369
COCOA, FL 329230369

New Mailing Address:

FEI Number: 59-2965844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KIRSCHNER, MARK
1111 BYRD ST
MELBOURNE, FL 32935 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: ROSENTHAL, STEVE
Address: 4101 ALDER PL
City-St-Zip: COCOA, FL 32926 US

Title: T/D () Delete
Name: BROWN, JAMES K
Address: 8700 RIDGEWOOD AVE UNIT # B-301
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: V/D () Delete
Name: BENNETT, LARRY
Address: 7560 GREENBORO DR APT 4
City-St-Zip: WEST MELBOURNE, FL 32904 US

Title: S/D () Delete
Name: PEARSON, HARRY
Address: 8703 CAMELIA CT
City-St-Zip: CAPE CANAVERAL, FL 32920 US

Title: D () Delete
Name: INGRAHAM, RONALD L
Address: 9570 S TROPICAL TRAIL
City-St-Zip: MERRITT ISLAND, FL 32952 US

Title: D () Delete
Name: DUGOFF, LETA
Address: 1024 FAIRWAY LN
City-St-Zip: ROCKLEDGE, FL 32955 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: () Change () Addition
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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: JAMES K. BROWN

D

02/17/2006

Electronic Signature of Signing Officer or Director

Date