


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2004 08:00 AM
Secretary of State

DOCUMENT # N14795		
1. Entity Name SPACE COAST POPS, INC.		
Principal Place of Business 2150 LAKE DR. COCOA, FL 32926	Mailing Address P.O. BOX 3344 COCOA, FL 32924	
DO NOT WRITE IN THIS SPACE		



01232004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2678234	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent WALKER, VERA W. 28 MITCHELL ST. E. COCOA, FL 32922	DO NOT WRITE IN THIS SPACE
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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2004**

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

10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CHRIST, O.J.W. 2150 LAKE DR. COCOA, FL 32926	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MLODZIANOWSKI, RUTH 2515 HERITAGE DRIVE TITUSVILLE, FL 32780	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALKER, VERA W 28 MITCHELL ST E COCOA, FL 32922	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P MASTERS, NOLAN 3935 ST ARMENS CIRCLE MELBOURNE, FL 32934	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ARMISTEAD, BETTY 56 VALENCIA RD ROCKLEDGE, FL 32955	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		

U000000161717
05/28/04-80001-015 61.25

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: O.J.W. CHRIST *O.J.W. Christ*, VICE-PRES 5-1-04 / 321-632-7445
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #