

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**May 04, 2006 8:00 am**  
**Secretary of State**

05-04-2006 90218 035 \*\*\*\*70.00

**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



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-2678234

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

WALKER, VERA W.  
28 MITCHELL ST. E.  
COCOA FL 32922

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. 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

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

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

TITLE VD ☐ Delete  
NAME CHRIST, O.J.W.  
STREET ADDRESS 2150 LAKE DR.  
CITY-ST-ZIP COCOA FL 32926

TITLE SD ☐ Delete  
NAME MLODZIANOWSKI, RUTH  
STREET ADDRESS 2515 HERITAGE DRIVE  
CITY-ST-ZIP TITUSVILLE FL 32780

TITLE D ☐ Delete  
NAME WALKER, VERA W  
STREET ADDRESS 28 MITCHELL ST E  
CITY-ST-ZIP COCOA FL 32922

TITLE P ☐ Delete  
NAME PARRISH, HENRY U  
STREET ADDRESS 29 RIVERSIDE DR #303  
CITY-ST-ZIP COCOA FL 32922

TITLE T ☒ Delete  
NAME ARMISTEAD, BETTY  
STREET ADDRESS 56 VALENCIA RD  
CITY-ST-ZIP ROCKLEDGE FL 32955 **DIED**

TITLE DIRECTOR ☐ Delete  
NAME ANNE ADAMS  
STREET ADDRESS 8425 ILLINOIS AVE.  
CITY-ST-ZIP MELBOURNE, FL 32904

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE TREASURER ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DIRECTOR ☐ Change ☒ Addition  
NAME ANNE ADAMS  
STREET ADDRESS 8425 ILLINOIS AVE.  
CITY-ST-ZIP MELBOURNE, FL 32904

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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]* O.J.W. CHRIST 4/25/06 632-7445