

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED
Oct 28, 2008
Secretary of State

DOCUMENT# N14795

Entity Name: SPACE COAST POPS, INC.

Current Principal Place of Business:

2150 LAKE DR.
COCOA, FL 32926

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 3344
COCOA, FL 32924

New Mailing Address:

FEI Number: 59-2678234 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

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

Name and Address of New Registered Agent:

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

10/28/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: CHRIST, O.J.W.,
Address: 2150 LAKE DR.
City-St-Zip: COCOA, FL 32926

Title: SD () Delete
Name: MLODZIANOWSKI, RUTH,
Address: 2515 HERITAGE DRIVE
City-St-Zip: TITUSVILLE, FL 32780

Title: T () Delete
Name: WALKER, VERA W
Address: 28 MITCHELL ST E
City-St-Zip: COCOA, FL 32922

Title: P () Delete
Name: PARRISH, HENRY U
Address: 29 RIVERSIDE DR #303
City-St-Zip: COCOA, FL 32922

Title: D () Delete
Name: ADAMS, ANNE
Address: 8425 ILLINOIS AVE
City-St-Zip: MELBOURNE, FL 32904

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: BROOKS, CHARLES
Address: 3260 MARSHFIELD PRESERVE WAY
City-St-Zip: KISSIMMEE, FL 34746

Title: V (X) Change () Addition
Name: PARRISH, HENRY U
Address: 29 RIVERSIDE DR #303
City-St-Zip: COCOA, FL 32922

Title: P (X) Change () Addition
Name: MASTERS, NOLAN
Address: 3935 ST ARMENS CIRCLE
City-St-Zip: MELBOURNE, FL 32934

I hereby certify that the information supplied with this filing does not qualify 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: O.J.W. CHRIST

V

10/28/2008

Electronic Signature of Signing Officer or Director

Date