

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N23769 (5)

1. Corporation Name

SOUTH BREVARD BRANCH 366, FLEET RESERVE ASSOCIATION, INCORPORATED

Principal Place of Business

7400 US HWY #1, LOT 2
MICO FL 32976

Mailing Address

203 SAND PINE RD.
INDIALANTIC FL 32903
US

3. Date Incorporated or Qualified
12/08/1987

3a. Date of Last Report
07/07/1995

2. Principal Place of Business

2a. Mailing Address

21 403 HWY A1A

26 403 HWY A1A

4. FEI Number
59-1834221

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 The Horizon Unit #403

27 The Horizon Unit #403

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

City & State

City & State

23 Satellite Beach, FL

28 Satellite Beach, FL

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

Zip

Country

Zip

Country

24 32937

25 USA

29 32937

30 USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

COLLIE, VAN B.
203 SAND PINE RD.
INDIALANTIC FL 32903

81 Name
Virgil Rainey

82 Street Address (P.O. Box Number is Not Acceptable)
The Horizon Unit #403 242

83 403 HWY A1A

84 City
Satellite Beach, FL 85 Zip Code
32937

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

VIRGIL RAINEY, Secy.

(NOTE: Registered Agent signature required when reinstating)

7/13/76

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME ANGOHL, DALE E.
STREET ADDRESS 7400 US HWY #1, LOT 2
CITY-ST-ZIP SEBASTIAN FL 32437 ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V
NAME BLACKFORD, GARLAND H
STREET ADDRESS 1931 ALMA DR
CITY-ST-ZIP MELBOURNE FL 32937 ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE I
NAME MEISER, ELMER C. SR.
STREET ADDRESS 733 ROSE AVE
CITY-ST-ZIP SEBASTIAN FL 32937 ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE P
NAME DUSTERHOFT, DENNIS A
STREET ADDRESS 1560 SUTSCHEK ST NE
CITY-ST-ZIP MELBOURNE FL 32937 ☒ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D
NAME HARTRUP, ANNA E.
STREET ADDRESS 448 WINCHESTER ROAD
CITY-ST-ZIP SATELLITE BEACH FL 32937 ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE S
NAME COLLIE, VAN B.
STREET ADDRESS 203 SAND PINE RD.
CITY-ST-ZIP INDIALANTIC FL 32937 ☒ DELETE

6.1 TITLE ☒ Change ☒ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VIRGIL RAINEY

Date

6/28/76

Daytime Phone #

407777858

0004871

CR2E037 (3/96)