

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N26013

1. Entity Name

SPACE COAST CHAPTER OF NATIONAL TECHNICAL ASSOCI

Principal Place of Business

835 SYCAMORE STREET  
TITUSVILLE FL 32780

Mailing Address

P.O. BOX 21144  
KENNEDY SPACE CENTER FL 32815-0144

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2650311

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

GREN, ERIC C  
1956 CARPENTER ROAD NORTH  
TITUSVILLE FL 32796

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.

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

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME GREEN, ERIC  
STREET ADDRESS 1956 CARPENTER ROAD  
CITY-ST-ZIP TITUSVILLE FL 32796

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

TITLE D ☐ Delete  
NAME SPENCER, JAMES JR.  
STREET ADDRESS 1040 MANIGAN AVENUE  
CITY-ST-ZIP OVIEDO FL 32765

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

TITLE D ☐ Delete  
NAME BRIGHTMAN, BERNADETTE  
STREET ADDRESS 1514 CLEARLAKE ROAD  
CITY-ST-ZIP COCOA FL 32922

TITLE D ☒ Change ☐ Addition  
NAME Brightman-Merrell, Bernadette  
STREET ADDRESS 1354 Heritage Acres Blvd.  
CITY-ST-ZIP Rockledge, FL 32955

TITLE D ☐ Delete  
NAME JENNINGS, JAMES  
STREET ADDRESS 9223 ALLWOOD PLACE  
CITY-ST-ZIP ORLANDO FL 32825

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

TITLE D ☐ Delete  
NAME SPEED, WELMON  
STREET ADDRESS 1328 HERITAGE ACRES BLVD.  
CITY-ST-ZIP ROCKLEDGE FL 32955

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

FILED  
May 15, 2000 8:00 am  
Secretary of State

05-15-2000 90248 032 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)