2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 15, 2003 8:00 am Secretary of State 05-15-2003 90110 030 ****61.25

DOCUMENT # N26013 1. Entity Name SPACE COAST CHAPTER OF NATIONAL TECHNICAL ASSOCIATION, INC.						03-13-2003 90110 030 *** 01.23			
						95656700			
Principal Place of Business Mailing Address									
835 SYCAMORE STREET P.O. BOX 21144 TITUSYILLE, FL 32780 KENNEDY SPACE CENTER, F			FI 32	8 15					
ingstice,	12 32780	REMINED! SI ME CENTEN,	11. 32	013					
_									1
2. Principal Place of Business		3. Mailing Address							ì
Suite, Apt. #, etc.		Suite, Apt. #, etc.							
Suite, Apr. #, etc.		Suite, Apr. W, Gro.				CHECK HERE IF MAKING CHANGES			
City & State		City & State			4. FEI Number		Ap	plied For]
-		700				59-2650311		t Applicable	1
Zip	Country Country	Zip Cou		intry				\$8.75 Additional Fee Required	
	6. Name and Address of Current	Registered Agent		7. Name and Address of New Registered Agent					
				Name					
GREN, ERIC C 1986 CARPENTER ROAD NORTH				Street Address (P.O. Box Number is Not Acceptable)					
TITUSVILLE, FL 32796									
ď			1						
\hat{t}			•	City			FL Zip Code	•	
8. The above	named entity submits this statement for	the purpose of changing its	registere	d office or re	egistered agent, or both, in	n the State of Florida	. I am familiar with,	and accept	1
the obligat	tions of registered agent.				-	•			}
SIGNATURE	Signature, typed or printed name of registered agent a	nd tile i applicable. (NOTE	: Registere	Agent Signature	required when reinstating)		DATE		
									- Land
	FILE NOW: FEE IS \$61:25	ipaign F ontributi	nancing on.	\$5.00 May Be Added to Fees		Check Payable Department of S		APPENDING TO SELECT TO SEL	
10.	OFFICERS AND DIR	ECTORS	11.		ADDITIONS/CHANC	ES TO OFFICERS A	ND DIRECTORS IN	10	1
TITLE	D	☐ Delete	TITLE				☐ Change	Addition	00
NAME	GREEN, ERIC		NAMI						
STREET ADDRESS CITY-ST-ZP	1956 CARPENTER ROAD		a	ST-21P					1,0
TITLE	D	☐ Delete	TITLE				Change	Addition	160
NAME	SPENCER, JAMES JR.	Li Delete	NAME				Sizzingt		2
STREET ADDRESS	1949-MANIGAN AVENUE		8	1 ADDRESS	3488 FOXTO OVIENU, FL	PROUNT			
CITY-ST-ZP	OVIEDO, FL 32765	 	CITY	S1-2(P .	OVIENO, FL	56103			
TITLE	MEDDELL PEDMADETTE	🗆 Delete	TOTE	1			🗌 Change	Addition	
NAME STREET ADDRESS	MERRELL, BERNADETTE 1354 HERITAGE ACRES BLVD.		NAME	T ADDRESS					1
CITY-ST-ZIP	ROCKLEDGE, FL 32955		H	ST-ZIP					
TITLE	D	☐ Delete	11/16			· ·	☐ Change	Addition	1
NAME	JENNINGS, JAMES		NAME	,			•		ļ
STREET ADDRESS City-St-2P	9223 ALLWOOD PLACE		H	1 ADDRESS					
	ORLANDO, FL 32825			S1 - 2 P					1
TITLE NAME	SPEED, WELMON	Delete	TITLE				☐ Change	Addition	
STREET ADDRESS	1328 HERITAGE ACRES BLVD.		a	1 ADDRESS					
CITY-ST-ZP	ROCKLEDGE, FL 32955		cut-	ST-ZIP					
TITLE		□ Delete	1111.6				☐ Change	Addition	Ì
NAME CIPET ADDRESS		at the state of th	NAME	i i					1
STREET ADDRESS City-St-Zip				1 ADDRESS ST-ZIP					
	<u></u>								-

12. I hereby certify that the information supplied with this filling 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:

BRE AND TYPED OR PRINTED MANE OF SIGNING OFFICER OR DIRECTOR SIGNAT

JAMES E, SPENCER, IR.