

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N44598

FILED
Jan 31, 2005
Secretary of State

Entity Name: THE SOUTH BREVARD DART CLUB INC.

Current Principal Place of Business:

4322 LIGUSTRUM DRIVE
MELBOURNE, FL 32934 US

New Principal Place of Business:

Current Mailing Address:

4322 LIGUSTRUM DRIVE
MELBOURNE, FL 32934 US

New Mailing Address:

FEI Number: 59-3096092

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MALLOW, DALE
4322 LIGUSTRUM DRIVE
MELBOURNE, FL 32934 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: MALLOW, DALE
Address: 4322 LIGUSTRUM DRIVE
City-St-Zip: MELBOURNE, FL 32934 US

Title: VD () Delete
Name: FACKLER, WAYNE
Address: 1545 HILLCREST DRIVE
City-St-Zip: MELBOURNE, FL 32935 US

Title: SD () Delete
Name: FRAZIER, REBECCA
Address: 1431 CINDY CIRCLE
City-St-Zip: PALM BAY, FL 32905

Title: TD () Delete
Name: NASH, NICOLE
Address: 1545 HILLCREST DRIVE
City-St-Zip: MELBOURNE, FL 32935

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DALE MALLOW

PD

01/31/2005

Electronic Signature of Signing Officer or Director

Date