FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



Secretary of State DIVISION OF CORPORATIONS

1998

DOCUMENT #

(0)

FILED Jan 29 1998 8:00am Secretary of State

NC. Principal Place of Business Mailing Address 250 COMMUNITY COLLEGE PKWY. PALM BAY FL 32909 US 2. Principal Place of Business 2a. Mailing Address 2b. Sulte, Applied For Not Applicable 2 Principal Place of Business 2
PALM BAY FL 32909 US O9/13/1991 4. FEI Number Applied For 59-3104339 Not A
2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 4. Suite, Apt. #, etc. 5. Election Campaign Financing 7 Trust Fund Contribution 4. Added to Fees 4. Added to Fees 4. State 5. Certificate of Status Desired 7. Is this nonprofit corporation a homeowners association? 4. State 7. Is this nonprofit corporation a homeowners association? 4. State 4. This corporation owes or has paid the current year Intangible 4. Personal Property Tax due June 30. 4. Yes 4. No 9. Name and Address of Current Registered Agent 4. Name 4. Name 4. Name 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address (P.O. Box Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address of Pox Number Is Not Acceptable) 4. Street Address
Suite, Apt. #, etc. City & State Trust Fund Contribution Added to Fees To Is this nonprofit corporation a horneowners association? Yes \(\) No Zip Country Zip Country Zip Country Zip Country 3. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes \(\) No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROBERTS, WILLIAM J 217 S ADAMS STREET TALLAHASSEE FL 32302 B3 41 City Titusville FL 85 Zip Code 3.77.80 11. Pursuant to the provisions of Sequence 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. If am familiar with, and accept the obligations of Feeting Statutes. SIGNATURE SIGNATURE PD Country 8. This corporation on a normeowners association? 10. Name and Address of New Registered Agent 11. Title 12. OFFICERS AND DIRECTORS IN 12 Change Addition 1. Title 12. Name 12. OFFICERS AND DIRECTORS IN 12 Name 13. Name 14. City 15. Title 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Nan
Trust Fund Contribution
City & State City & State
23
24 25 29 30 Personal Property Tax due June 30. Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent
ROBERTS, WILLIAM J 217 S ADAMS STREET TALLAHASSEE FL 32302 84 City Titusville Titusvill
ROBERTS, WILLIAM J 217 S ADAMS STREET TALLAHASSEE FL 32302 84 City Titusville Titusvill
TALLAHASSEE FL 32302 84
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 agent, or both, in the State of Florida, Such change was 3 uthorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of Economic 617.0503, Florida Statutes, SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE PD ADAMS, TOM 8. STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS 1.3 STREET ADDRESS DEC-1519 Clearlake Road
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 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 Joe S. Matheny 1-22-98 Interpretation of Sections 617.0503 and 617.1508, Florida Statutes. Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 Interpretation of Sections 617.0502 and 617.1508, Florida Statutes. Joe S. Matheny 1-22-98 JOE S. Matheny DATE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Interpretation of Section of Company and Interpretation of Company and Interpr
SIGNATURE Signature typed or produced agent and the applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD Change ADAMS, TOM B. STREET ADDRESS 11550 C R507 13 STREET ADDRESS 14 STREET ADDRESS 15 STREET ADDRESS 16 STREET ADDRESS 17 STREET ADDRESS 17 STREET ADDRESS 18 STREET ADDRESS
SIGNATURE Signature typed or produced agent and the applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD Change ADAMS, TOM B. STREET ADDRESS 11550 C R507 13 STREET ADDRESS 14 STREET ADDRESS 15 STREET ADDRESS 16 STREET ADDRESS 17 STREET ADDRESS 17 STREET ADDRESS 18 STREET ADDRESS
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11 TITLE PD
TITLE PD & Change Addition NAME ADAMS, TOM B. STREET ADDRESS 11550 C R507 1.1 TITLE PD Change Addition
NAME ADAMS, TOM B. STREET ADDRESS 11550 C R507 ADAMS, TOM B. 12 NAME Stephen J. Megregian 3 STREET ADDRESS 7 BCC-1519 Clearlake Road
STREET ADDRESS 11550 C R507 1.3 STREET ADDRESS % BCC-1519 Clearlake Road
CITY-ST-ZIP FELLMERE FL 1.4 CITY-ST-ZIP Cocoa, FL 32922
TITLE D Change X Addition
NAME PHILLIPS, JERRY 22 NAME Eugene C. Johnson
STREET ADDRESS 2530 KIRBY AVE., NE UNIT 305 2.3 STREET ADDRESS 531 1st Avenue
CITY-ST-ZIP PALM BAY FL 2.4CITY-ST-ZIP Satellite Beach, FL 32937
TITLE D DELETE 3.1 TITLE D Change K Addition
NAME THOMAS SZUBA 32 NAME Bert Purga
STREET ADDRESS 1415 FOUNDATION PARK BLVD. GITY-ST-ZIP PALM BAY FL 33.STREET ADDRESS %BCC-1519 Clearlake Road COCOA. FL 32922
CITY-ST-ZIP PALM BAY FL 34.CITY-ST-ZIP Cocoa, FL 32922 TITLE VD X DELETE 4.1 TITLE D Change K Addition
NAME MEGREGIAN, STEPHEN 4.2 NAME Joe Lee Smith
STREET ADDRESS C/O BCC-1519 CLEAR LAKE RD. 4.3 STREET ADDRESS ZBCC-1519 Clearlake Road
CITY-ST-ZIP COCOA FL 44CITY-ST-ZIP Cocoa, FL 32922
TITLE D X DELETE 5.1 TITLE Change Addition
NAME NANNI, BOB 5.2 NAME
STREET ADDRESS 120 MALABAR RD SE 5.3 STREET ADDRESS
CITY-ST-ZIP PAŁM BAY FL 5.4 CITY-ST-ZIP
TITLE D X DELETE 6.1 TITLE Change Addition
NAME BRANDON, HARRY E. 62 NAME
STREET ADDRESS 1900 S. HARBOR CITY BLVD. 6.3 STREET ADDRESS
CITY-ST-ZIP BELBOURNE FL 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. 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 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.

1/21/98

407-632-1111