

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45494

FILED  
Feb 20, 2012  
Secretary of State

**Entity Name:** SPACE COAST INTERGROUP OF OVEREATERS ANONYMOUS, INC.

**Current Principal Place of Business:**

2441 WOODTHRUSH PLACE  
MELBOURNE, FL 32904 US

**New Principal Place of Business:**

**Current Mailing Address:**

2441 WOODTHRUSH PLACE  
MELBOURNE, FL 32904 US

**New Mailing Address:**

FEI Number: 59-3043506

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

WATTERUD, VIVIAN  
2441 WOODTHRUSH PLACE  
MELBOURNE, FL 32904 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: DC  
Name: LOIACONO, GEORGE  
Address: 571 VINROSE CIRCLE  
City-St-Zip: PALM BAY, FL 32909

Title: DV  
Name: WATTERUD, VIVIAN  
Address: 2441 WOODTHRUSH PLACE  
City-St-Zip: MELBOURNE, FL 32904

Title: DS  
Name: ELKINS, RITA  
Address: 5970 CANNON AVE  
City-St-Zip: COCOA, FL 32927

Title: DT  
Name: JOY, CHARLES  
Address: 2220 FLOWER TREE CIRCLE  
City-St-Zip: MELBOURNE, FL 32935

I hereby 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 all other like empowered.

SIGNATURE: VIVIAN WATTERUD

DV

02/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date