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FILED
Jun 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N48357** (0)
1. Corporation Name
BREVARD TEACHING AND RESEARCH LABORATORIES, INC.



Principal Place of Business C/O BREVARD COMMUNITY COLLEGE 250 GRASSLAND ROAD PALM BAY FL 32909	Mailing Address C/O BREVARD COMMUNITY COLLEGE 250 GRASSLAND ROAD PALM BAY FL 32909-2289
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3. Date Incorporated or Qualified 04/14/1992	3a. Date of Last Report 03/22/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-3117858 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HELMSTETTER, MICHAEL
C/O FLORIDA ADVANCED TECHNOLOGY CENTER
250 GRASSLAND RD
PALM BAY FL 32909**

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 office or 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DCP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HELMSTETTER, MICHAEL	1.2 NAME	
STREET ADDRESS	250 GRASSLAND RD	1.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LAWTON, ROBERT	2.2 NAME	
STREET ADDRESS	250 GRASSLAND RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PURGA, BERT	3.2 NAME	
STREET ADDRESS	BCC COCOA CAMPUS 1519 CLEARLAKE ROAD	3.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL 32922-6597	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	D'ALBORA, JOHN	4.2 NAME	
STREET ADDRESS	BCC BOT 1519 CLEARLAKE RD	4.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MEGREGAN, STEPHEN	5.2 NAME	
STREET ADDRESS	1519 CLEARLAKE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	COCOA FL 32922-6597	5.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WHITCOMB, JARED	6.2 NAME	
STREET ADDRESS	250 GRASSLAND ROAD	6.3 STREET ADDRESS	
CITY-ST-ZIP	PALM BAY FL	6.4 CITY-ST-ZIP	

14. I do 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.

SIGNATURE

[Signature] **Jared H. Whitcomb**
5/1/97

CR2E037 (9/96)