


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 28, 2005 8:00 am**  
**Secretary of State**

04-28-2005 90183 050 \*\*\*\*70.00

<b>DOCUMENT # N50556</b> 1. Entity Name <b>BREVARD COUNTY MANAGERS TRUST FUND, INC.</b>					
Principal Place of Business <b>2725 JUDGE FRAN JAMIESON WAY BLDG C VIERA, FL 32940</b>			Mailing Address <b>2725 JUDGE FRAN JAMIESON WAY BLDG C VIERA, FL 32940</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-3169393</b>	
				5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>SWANKE, ELIZABETH 2725 JUDGE FRAN JAMIESON WAY BLDG C STE 303 VIERA, FL 32940</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
		<b>Make check payable to Florida Department of State</b>			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD <input checked="" type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	JENKINS, TOM N.		NAME		
STREET ADDRESS	2725 JUDGE FRAN JAMIESON WAY		STREET ADDRESS		
CITY-ST-ZIP	VIERA, FL 32940		CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	P/D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BUSACCA, PEGGY		NAME	Busacca, Peggy	
STREET ADDRESS	2725 JUDGE FRAN JAMIESON WAY		STREET ADDRESS	2725 Judge Fran Jamieson Way	
CITY-ST-ZIP	VIERA, FL 32940		CITY-ST-ZIP		
TITLE	ST <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	WHITTEN, STOCKTON		NAME		
STREET ADDRESS	2725 JUDGE FRAN JAMIESON WAY		STREET ADDRESS		
CITY-ST-ZIP	VIERA, FL 32940		CITY-ST-ZIP		
TITLE	D <input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	LUSK, DONALD		NAME		
STREET ADDRESS	2725 JUDGE FRAN JAMIESON WAY		STREET ADDRESS		
CITY-ST-ZIP	VIERA, FL 32940		CITY-ST-ZIP		
TITLE	<input type="checkbox"/> Delete		TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME			NAME	Washburn, Jr., William	
STREET ADDRESS			STREET ADDRESS	2725 Judge Fran Jamieson Way	
CITY-ST-ZIP			CITY-ST-ZIP	Viera, FL 32940	
TITLE	<input type="checkbox"/> Delete		TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. 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 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.					
<b>SIGNATURE:</b> <u>Peggy Busacca</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<u>Peggy Busacca, 4/22/05 321-633-2001</u> <small>Date Daytime Phone #</small>		