

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 20, 2001 8:00 am
Secretary of State

06-20-2001 90002 028 ****61.25

DOCUMENT # N93000005405

1. Entity Name

SPACE COAST FOUR WHEELER'S ASSOCIATION, INC.

Principal Place of Business

780 WATERSIDE ROAD
 PALM BAY FL 32909
 US

Mailing Address

P.O. BOX 360061
 MELBOURNE FL 32936-0061
 US

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

59-3231215

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

LATFORD, DOUGLAS
 1252 BONITA CT.
 PALM BAY FL 32905

7. Name and Address of New Registered Agent

Name **Douglas Latford**

Street Address (P.O. Box Number is Not Acceptable)
780 Waterside Rd SE

City **Palm Bay**

FL

Zip Code
32909

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

15 April 01

**FILE NOW:
 FEE IS \$61.25**

9. Election Campaign Financing
 Trust Fund Contribution. ☐

**\$5.00 May Be
 Added to Fees**

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE **DP** ☒ Delete
 NAME **LATFORD, DOUGLAS**
 STREET ADDRESS **1252 BONITA CT.**
 CITY-ST-ZIP **PALM BAY FL 32905**

TITLE **DS** ☒ Delete
 NAME **FINCH, GING**
 STREET ADDRESS **418 ST. JOHNS DR.**
 CITY-ST-ZIP **SATELLITE BEACH FL 32937**

TITLE **DV** ☒ Delete
 NAME **BOEN, RAY**
 STREET ADDRESS **6916 BLACKBERRY CT.**
 CITY-ST-ZIP **VIERA FL 32940**

TITLE **DT** ☒ Delete
 NAME **LATFORD, DONNA LEE**
 STREET ADDRESS **1252 BONITA CT.**
 CITY-ST-ZIP **PALM BAY FL 32905**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **DP** ☒ Change ☐ Addition
 NAME **Latford, Douglas**
 STREET ADDRESS **780 Waterside Rd SE**
 CITY-ST-ZIP **Palm Bay, FL 32909**

TITLE **Secretary** ☒ Change ☐ Addition
 NAME **Jennifer Day**
 STREET ADDRESS **1553 N. Palm Dr**
 CITY-ST-ZIP **Satellite Beach, FL 32937**

TITLE **DV** ☒ Change ☐ Addition
 NAME **Scott McReynolds**
 STREET ADDRESS **1970 Duncun Lane**
 CITY-ST-ZIP **Palm Bay, FL 32950**

TITLE **DT** ☒ Change ☐ Addition
 NAME **Jeremy Jackson**
 STREET ADDRESS **1408 South Palm**
 CITY-ST-ZIP **Satellite Beach, FL 32937**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 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.

SIGNATURE:

SIGNATURE REQUIRED

15 April 01 321-777-3069

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CR2E037 (10/00)