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FILED
Jun 25 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000000776 (4)

1. Corporation Name

SPACEPORT ROTARY OF TITUSVILLE FOUNDATION, INC.



Principal Place of Business

Mailing Address

POST OFFICE BOX 6802
TITUSVILLE FL 32782-6802

POST OFFICE BOX 6802
TITUSVILLE FL 32782-6802

3. Date Incorporated or Qualified

02/14/1994

4. FEI Number

59-3331060

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☐ No

8. 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

GRIFFITH, FRANK J JR.
1970 MICHIGAN AVENUE
BUILDING E
COCOA FL 32922

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

TITLE PD
NAME GARRISON, JIM
STREET ADDRESS 751 SO WASHINGTON AVE.
CITY-ST-ZIP TITUSVILLE FL 31

☐ DELETE

TITLE VD
NAME BUTCHER, WILLIAM H
STREET ADDRESS 621 PARK AVE.
CITY-ST-ZIP TITUSVILLE FL

☐ DELETE

TITLE VD
NAME JAFFE, TODD B
STREET ADDRESS 8770 SO WASHINGTON AVE.
CITY-ST-ZIP TITUSVILLE FL

☐ DELETE

TITLE T
NAME FORBES, BARRY
STREET ADDRESS 100 DELANOY AVE.
CITY-ST-ZIP COCOA FL 16

☐ DELETE

TITLE S
NAME SMITH, ROBERT
STREET ADDRESS 1231 GARDEN ST
CITY-ST-ZIP TITUSVILLE FL 10

☐ DELETE

TITLE D
NAME LANDRENEAU, MICHAEL
STREET ADDRESS 1845 MEDICAL DRIVE
CITY-ST-ZIP TITUSVILLE FL 23

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME Butcher, William H
1.3 STREET ADDRESS 621 Park Avenue
1.4 CITY-ST-ZIP Titusville, FL 32796

☒ Change ☐ Addition

2.1 TITLE VD
2.2 NAME Smith, Robert
2.3 STREET ADDRESS 1231 Garden Street
2.4 CITY-ST-ZIP Titusville, FL 32796

☒ Change ☐ Addition

3.1 TITLE S
3.2 NAME Jaffe, Todd
3.3 STREET ADDRESS 6770 S. Washington Ave
3.4 CITY-ST-ZIP Titusville, FL 32780

☒ Change ☐ Addition

4.1 TITLE V
4.2 NAME Nix, Terry
4.3 STREET ADDRESS 309 LaGrange Ave
4.4 CITY-ST-ZIP Titusville, FL 32796

☒ Change ☐ Addition

5.1 TITLE T
5.2 NAME Forbes, Barry
5.3 STREET ADDRESS 100 Delannoy Ave
5.4 CITY-ST-ZIP Cocoa, FL 32922

☒ Change ☐ Addition

6.1 TITLE D
6.2 NAME Garrison, Jim
6.3 STREET ADDRESS 751 S. Washington Ave
6.4 CITY-ST-ZIP Titusville, FL 32780

☒ Change ☐ Addition

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.

CR2E037 (10/97)