2001 UNIFORM BUSINESS REPORT (UBR) **FILED** Apr 27, 2001 8:00 am Secretary of State DOCUMENT # N9400004379 1. Entity Name SPACE COAST SPORTFISHING FOUNDATION, INC. 04-27-2001 90396 040 ****61.25 Principal Place of Business Mailing Address 49 YAWL DR 49 YAWL DR COCOA BEACH FL 32931 COCOA BEACH FL 32931 D0041911 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-3292319 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) HOREY, RAYMOND S 49 YAWL DR. COCOA BEACH FL 32931 Zip Code City 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) 9. Election Campaign Financing Make Check Payable to **FILE NOW:** \$5.00 May Be Trust Fund Contribution. **Department of State** Added to Fees **FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. DIRECTOR Change Addition TITLE Delete TITLE HOREY, RAYMOND S LINDA GOODE NAME NAME IOI E. MELBOURNE, AUR. STREET ADDRESS 49 YAWL DR. STREET ADDRESS MELBORN, FL 32901 CITY-ST-ZIP CITY-ST-7JP COCOA BEACH FL PD ☐ Change ☐ Addition TITI F TITLE Delete DIRECTOR HARRIS, H.C. "SKIP" NAME JAY DEE OSIER NAME HIZED WASHINGTON AVE STREET ADDRESS STREET ADDRESS 230 TIKI AVE 32786 CITY-ST-ZIP TITUSVILLE, FL CITY-ST-7/P **MERRITT ISLAND FL 32952** ☐ Change ☐ Addition **VPD** TITLE TITLE ☐ Delete DI BRETOIL MARGO MC KNIGHT SMITH, GEORGE NAME NAME BZZS N. WIGHAM RD STREET ADDRESS STREET ADDRESS **50 YAWL DRIVE** MELBOURNE, FL 32440 CITY-ST-ZIP CITY-ST-ZIP COCOA BEACH FL 32931 ☐ Change ☐ Addition ☐ Delete TITLE NAME ALANA LOVE NAME STREET ADDRESS STREET ADDRESS 2145 CAPEVIEW ST. CITY-ST-ZIP MERRITT ISLAND FL CITY-ST-ZIP DIRECTOR ☐ Delete Change ☐ Addition GEORGE CROOK HIM SAN YSIDROWAY NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ROCKLEDGE, FL CITY-ST-ZIP

12. Thereby 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.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

DIRECTOR

ORLAHDO, FL

DUANT DEFREESE

6295 SEA WOALD DRIVE

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

32955

☐ Defete

4/19/2001 321-184-0471
Date Daytime Phone #

Change

Addition