


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 08, 2005 8:00 am
Secretary of State

04-08-2005 90049 037 ****61.25

DOCUMENT # N94000006230		
1. Entity Name BUILDING OFFICIALS ASSOCIATION OF BREVARD COUNTY, INC.		
Principal Place of Business 2285 MINTON ROAD WEST MELBOURNE, FL 32904		Mailing Address 2285 MINTON ROAD WEST MELBOURNE, FL 32904



2. Principal Place of Business 900 E Strawbridge Ave		3. Mailing Address 900 E Strawbridge Ave	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State Melbourne FL		City & State Melbourne FL	
Zip 32901	Country	Zip 32901	Country

01202005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3336413		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MARIAN, JOHN F. 2285 MINTON ROAD WEST MELBOURNE, FL 32904		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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  (NOTE: Registered Agent signature required when reinstating) DATE 3-31-05

**Filing Fee Is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

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

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TALBERT, TERRY W 900 E STRAWBRIDGE AVE MELBOURNE, FL 32901	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PARROTT, GLEN H JR 2285 MINTON RD WEST MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PARROTT, GLEN H JR 2285 MINTON RD WEST MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD ETHERIDGE, RICHARD P. 2285 MINTON RD WEST MELBOURNE, FL 32904	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD NEAL, TAMARA D. 106 VIN ROSE CIR., S.E. PALM BAY, FL	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD CURTIS, Madilana K. 900 E. STRAWBRIDGE AVE Melbourne, FL 32901	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DAVIS, PAUL A 476 WINDSHORE CT MELBOURNE, FL 32934	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TALBERT, TERRY W 900 E Strawbridge Ave Melbourne FL 32901	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BEYER, AL 900 E STRAWBRIDGE AVE MELBOURNE, FL 32901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARIAN, JOHN F 2285 MINTON RD. MELBOURNE, FL 32904	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:  3-31-05 321-674-5701
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #