

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
May 05, 2003 8:00 am
Secretary of State

05-05-2003 90190 017 ****70.00

DOCUMENT # N95000000106

1. Entity Name

COUNTERATTACK-BREVARD, INC.



Principal Place of Business
**427 NORTH PRIMROSE DRIVE
ORLANDO FL 32803**

Mailing Address
**427 NORTH PRIMROSE DRIVE
ORLANDO FL 32803**

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 **59-3368659**

Applied For

Not Applicable

5. Certificate of Status Desired ☒

\$8.75 Additional
Fee Required

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GUILMET, THOMAS P
427 N PRIMROSE DR
ORLANDO FL 32803**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

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 | VD | <input type="checkbox"/> Delete |
| NAME | CHANNELL, WARREN | |
| STREET ADDRESS | GRAND CYPRESS BLVD | |
| CITY-ST-ZIP | ORLANDO FL 32836 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | DANKOVICH, WENDY | |
| STREET ADDRESS | 3787 SAWGRASS DRIVE | |
| CITY-ST-ZIP | TITUSVILLE FL 32780 | |
| TITLE | PD | <input type="checkbox"/> Delete |
| NAME | DIGGS, DAVID | |
| STREET ADDRESS | 211 BUSH BLVD | |
| CITY-ST-ZIP | SANFORD FL 32773 | |
| TITLE | TD | <input type="checkbox"/> Delete |
| NAME | SHAW, DAVE | |
| STREET ADDRESS | 530 DOG TRACK ROAD | |
| CITY-ST-ZIP | LONGWOOD FL 32750-6546 | |
| TITLE | D | <input checked="" type="checkbox"/> Delete |
| NAME | DELAPPA, JOHN | |
| STREET ADDRESS | 100 COLONIAL CENTER PKWY STE 300 | |
| CITY-ST-ZIP | LAKE MARY FL 32746 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | THOMAS, WILLIAM | |
| STREET ADDRESS | 6629 CRENSHAW DRIVE | |
| CITY-ST-ZIP | ORLANDO FL 32835 | |

| | | |
|----------------|-------------------------|---|
| TITLE | PD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Channell, Warren | |
| STREET ADDRESS | 60 Grand Cypress Blvd. | |
| CITY-ST-ZIP | Orlando, FL 32836 | |
| TITLE | VD | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Thomas, William | |
| STREET ADDRESS | 6629 Crenshaw Drive | |
| CITY-ST-ZIP | Orlando, FL 32835 | |
| TITLE | T/S/D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Shaw, Dave | |
| STREET ADDRESS | 1255 Glen Royal Terrace | |
| CITY-ST-ZIP | DeLand, FL 32720 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | Diggs, David | |
| STREET ADDRESS | 211 Bush Blvd | |
| CITY-ST-ZIP | Sanford, FL 32773 | |
| TITLE | D | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Freis, Gerald | |
| STREET ADDRESS | 1426 W. Stetson Street | |
| CITY-ST-ZIP | Orlando, FL 32804 | |
| TITLE | D | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | Guilmet, Thomas | |
| STREET ADDRESS | 427 N. Primrose Drive | |
| CITY-ST-ZIP | Orlando, FL 32803 | |

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:

Thomas P. Guilmet
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Thomas P. Guilmet

4/29/03

(407) 897-4412

Date

Daytime Phone #

CR2E037 (10/02)

Attachment
101 00684
#N95000000106

**2003 Not-For-Profit Corporation
Uniform Business Report (UBR)
Document #N95000000106
CounterAttack-Brevard, Inc.**

#10 & #11: Officers and Directors

Additions/Changes to Officers and Directors in #10 (continued):

Additions:

Title: D
Name: Perry, Isabel
Street Address: 5019 Winwood Way
City/State/Zip: Orlando, FL 32819-3303

Title: D
Name: Reid, Roy
Street Address: 530 E. Central, #1801
City/State/Zip: Orlando, FL 32801

Delete:

Title: D
Name: Gallegos, Linda Hayes
Street Address: 7306 Swallow Run
City/State/Zip: Winter Park, FL 32792