FILE NOW: FILING FEE IS \$61.25

Mailing Address

96 WILLARD ST

COCOA FL 32922

2a. Malling Address

City & State

29

9. Name and Address of Current Registered Agent

Suite, Apt. #, etc.

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

2. Principal Place of Business

THERIAC, JAMES S

96 WILLARD ST **SUITE 302** COCOA FL 32922

Suite, Apt. #, etc.

City & State

Zip

96 WILLARD ST

COCOA FL 32922

SUITE 302



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N95000003356 (1)

BOYS AND GIRLS CLUB OF BREVARD, INC.

25

3. Date Incorporated or Qualified 07/13/1995 Applied For 4. FEI Number 59-3327787 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association? Yes No No 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent

FILED

Apr 15 1998 8:00am

Secretary of State

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

Country

82

Name

City

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

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	,	13.	ADDITIONS/CHANGES TO C	FFICERS AND DIRECTOR	S IN 12
TITLE	D	DELETE	1.1 TITLE		Change	☐ Addition
NAME	THERIAC, JAMES S III		1.2 NAME			
STREET ADDRESS	96 WILLARD ST SUITE 302		1.3 STREET ADDRESS			
CITY-ST-ZIP	COCOA FL 32922		1.4 CITY-ST-ZIP			
TITLE	D	DELETE	2.1 TITLE		Change	Addition
NAME	BROCK, DAVID		2.2 NAME			
STREET ADDRESS	1020 US HWY 1		2.3 STREET ADDRESS			Ì
CITY-ST-ZIP	ROCKLEDGE FL 32955		2. 4 CITY-ST-ZIP			
TITLE	D	DELETE	3.1 TITLE		☐ Change	Addition
NAME	KASICA, THOMAS		3.2 NAME			
STREET ADDRESS	1800 W HIBISCUS BLVD SUITE 128		3.3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32935		3.4. CITY - ST - ZIP			
TITLE	D	DELETE	4.1 TITLE		☐ Change	Addition
NAME	TELLES, ANGEL		4.2 NAME			
STREET ADDRESS	962 TAMARIND CIR.		4.3 STREET ADDRESS			
CITY-ST-ZIP	ROCKLEDGE FL 32955		4.4 CITY-ST-ZIP			
TITLE	D	DELETE	5.1 TITLE		☐ Change	Addition
NAME	EDWADS, ART		5.2 NAME			ĺ
STREET ADDRESS	5325 AMY WAY		5.3 STREET ADDRESS			
CITY-ST-ZIP	MIMS FL 32754		5.4 CITY - ST - ZIP			
TITLE	D	DELETE	6.1 TITLE		Change	Addition
NAME	Bannister, Tony		6.2 NAME			
STREET ADDRESS	214 OLYMPIC WAY #5		6.3 STREET ADDRESS			
CITY-ST-ZIP	MELBOURNE FL 32901		6.4 CITY-ST-ZIP			

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 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.

SIGNATURE:

La 91 Drawit Couthon's J. HASICA, President 1/5/98

Zip Code

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