FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N95000003492 (4) **DOCUMENT** #

BREVARD COUNTY BAR ASSOCIATION FOUNDATION, INC.

FILED Feb 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address									i iamiilai aim (Bim) billii abiil Abill		/ ()		
1149 LAKE DRIVE 1149 LAKE DRIVE SUITE 204 SUITE 204 COCOA FL 32922 COCOA FL 32922								3.	Date Incorporated or Qualified 07/21/1995	i			
OCCUPATE SEALE									59-2244869			plied For t Applicable	
2. Principal Place of Business 21				2a. Mailing Address 26				5.	Certificate of Status Desired		\$8.75 A	Additional	
Suite, Apt.	Suite, Apt. #, etc.	Apt. #, etc.			6.	Election Campaign Financing		\$5.00 N					
22				27					Trust Fund Contribution				
City & State				City & State				7.	7. Is this nonprofit corporation a homeowners association?				
Zip	Country			Zip Cox			Country		This corporation owes or has	paid the curre	nt year Inte	angible	
24	25				30				Personal Property Tax due Jur] No	
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent						
						81	Name	ı					
CROOKS, KENNETH 7380 MURRELL RD., SUITE 400						82	Street	treet Address (P.O. Box Number is Not Acceptable)					
MELBOURNE FL 32940						83							
						84	City			FL	85 Zip C	Code	
11. Pursuant l	to the provisions	of Sections 617.050	2 and 61	7.1508, Florida Statut	es, the	above	-named	corporation	on submits this statement for the		hanging its	s registered	
office or re agent. I a	egistered agent, m familiar with, s	o both in the State	of Floridations of.	a. Such change was a Section 617.0503. Fla	authoriz orida Si	ed by	the cor	rporation's	on submits this statement for the board of directors. I hereby acc	ept the appoi	ntment as i	registered	
SIGNATURE	Y / /								•	2_/16/	9 R		
Signature, typed or printed name of required agent and title if applicable (NOTE: Re							nt signature	e required whe	en reinstating)	DATE		—— I,	
12.		OFFICERS AN	D DIREC	DIRECTORS			13.		ADDITIONS/CHANGES TO OFF				
TITLE	5	1466 6 6		☐ DELETE			1.1 TITLE				Change	Addition	
NAME	HARRIS, JOI			1			1.2 NAME					[;	
STREET ADDRESS	S 509 PALM AVENUE TITUSVILLE FL 32796			1.3 \$			1.3 STREET ADDRESS					Įį.	
CITY-ST-ZIP		FL 32/90				1.4 CITY-ST-ZIP		D					
TITLE	D D	10 A		☐ DELETE			2.1 TITLE			8	Change	Addition	
NAME	BONDER, KIM			N.4			2.2 NAME		DER, KIM			`]	
STREET ADDRESS	MELDOLIDATE EL 22040			-			2.3 STREET ADDRESS		5 JUDGE FRAN J	AMIESC	N WA	Y	
CITY-ST-ZIP	V	E FL 32940					2. 4 CITY-ST-ZIP 3.1 TITLE		RA, FL 32940		4		
TITLE	· •	ODETOUCH		☐ DELETE				V		_	Change	Addition	
NAME	KLAYMAN, C			3.2 N/				YMAN, GRETCHEN			.		
STREET ADDRESS	MEDA EL 20040						ADDRESS		5 N. WICKHAM R		E 104	4	
CITY-ST-ZIP	P VICTOR PL 32940								BOURNE, FL 32	940	7.0	1 1 1 1 1 1 1	
TITLE		MEG		☐ DELETE		TITLE			-	L	Change	Addition	
NAME	BEADLE, JAMES 5205 BABCOCK STREET N.E.				1	NAME						1	
STREET ADDRESS	PALM BAY FL 32905					4.3 STREET ADDRESS							
CITY-ST-ZIP	D DELETE			The Decision	4.4 CITY - ST - ZIP			<u> </u>		· ·	Tohana	1 December 1	
TITLE	KRASNY, SCOTT			IN DELEVE	TITLE			KS, KENNETH C.	L	Change	Addition		
NAME	T TAN O ADDOLLO DILID				- 1	NAME				eta 1	100		
STREET ADDRESS	MELBOURNE EL AGOA4				5.3 STREET :				Murrell Rd.,		.00	. [
CITY-ST-ZIP	D D			17.0			I - ZIP		oourne, FL 329		Change	Addition	
TITLE	KRASNY, SCOTT			•			TITLE		Cantinia	L-	T OWNER	MOUIDON COM	
NAME	200 0 400110 0110						NAME G		Pain Bay Rd	NE			
STREET ADDRESS								1 3 7 7	A A	4 4 4			
CITY-ST-ZIP	MELBOURNE FL 32901					CITY-S	ı-ZIP	Palm	1 Bay PL 324	102			

does not qualify for the exemption stated in Section 119.07(1)(i). Florida Statutes. I further certify that the information on is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an exemple and the appears in the same legal effect as if made under oath; that I am an exemple and the appears in the same appear