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FILED
Apr 25, 2001 8:00 am
Secretary of State

02-08-2001 90384 013 ****61.25

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N95000003492

1. Entity Name

BREVARD COUNTY BAR ASSOCIATION FOUNDATION, INC.

Principal Place of Business

1149 LAKE DRIVE
SUITE 100
COCOA FL 32922

Mailing Address

1149 LAKE DRIVE
SUITE 100
COCOA FL 32922

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2244869

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DE LOACH, GINA
1149 LAKE DR #100
COCOA FL 32922

7. Name and Address of New Registered Agent

Name *Angela Fieps*

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

1149 LAKE DRIVE, SUITE 100

City

FL

32922

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

Angela Fieps

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

(NOTE: Registered Agents signatures required when requesting)

DATE

4-16-01

FILE NOW:
FEE IS \$81.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	☒ Delete
NAME	HARRIS, JOHN M	
STREET ADDRESS	1820 GARDEN STREET	
CITY-ST-ZIP	ITUSVILLE FL 32798	
TITLE	T	☐ Delete
NAME	KRASNY, SCOTT D	
STREET ADDRESS	304 S HARBOR CITY BLVD, STE 201	
CITY-ST-ZIP	MELBOURNE FL 32902	
TITLE	SD	☐ Delete
NAME	REINMAN, MORGAN LAUR	
STREET ADDRESS	335 S. PLUMOSA ST., STE. D	
CITY-ST-ZIP	MERRIT ISLAND FL 32954	
TITLE	VD	☐ Delete
NAME	CROOKS, KENNETH C	
STREET ADDRESS	7380 MURRELL RD., STE 100	
CITY-ST-ZIP	MELBOURNE FL 32940	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	President	☒ Change ☐ Addition
NAME	Ken Crooks	
STREET ADDRESS	8240 CLEVELAND DRIVE, Suite 100	
CITY-ST-ZIP	Melbourne, Florida 32940	
TITLE	President - Elected	☒ Change ☐ Addition
NAME	Morgan Laur Reinman	
STREET ADDRESS	305 S. PLUMOSA STREET, Suite D	
CITY-ST-ZIP	Merritt Island, Florida 32954	
TITLE	Secretary	☒ Change ☐ Addition
NAME	Scott Krasny	
STREET ADDRESS	304 S Harbor City Blvd	
CITY-ST-ZIP	Melbourne, Florida 32902	
TITLE	Treasurer	☐ Change ☒ Addition
NAME	Jason Reinman	
STREET ADDRESS	101 S. Courthouse Pkwy, Suite 201	
CITY-ST-ZIP	Merritt Island, Florida 32952	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 an other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

3/5/01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2037 (10/00)