

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

FILED
Aug 08, 2003 8:00 am
Secretary of State

07-09-2003 90038 022 ****61.25

DOCUMENT # N95000005974

1. Entity Name
THE BREVARD SINGLE ADULT CLUB, INC.



Principal Place of Business
**MARTIN ANDERSEN SR. CEN
1025 S. FLORIDA AVE.
ROCKLEDGE FL 32955**

Mailing Address
**BREVARD SINGLE ADULT CLUB
P.O. BOX 631
COCOA FL 32923-0631
US**

55053659

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip

4. FEI Number **59-3355877**

Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
**DANIELS, THELMA Delete X
1692 KEYS GATE DRIVE
MELBOURNE FL 32940**

7. Name and Address of New Registered Agent
Name **Marge Jarvis, President**
Street Address (P.O. Box Number is Not Acceptable)
435 Catamaran Drive #53
City **Merritt Island FL 32952**
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 *Marge Jarvis, President* DATE **8-2-2003**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS \$61.25
After September 10, 2003, min will be \$236.25

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DANIELS, THELMA 1692 KEYS GATE DR MELBOURNE FL 32940 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP PARKER, ROLAND 5820 BALTIMORE AVE COCOA FL 32927 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VP JEWELL, HENRY N. 1513 CAMBRIDGE DR COCOA FL 32922 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PALMER, LOIS 170 LONG POINT ROAD CAPE CANAVERAL FL 32920 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIGHT, WILLIAM E 1318 STETSON DR. COCOA FL 32922 <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BOYLE, CHRISTINE H 4684 WOOD STORK DR. MERRITT ISLAND FL 32953 <input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Marge Jarvis 435 Catamaran Drive #53 Merritt Island, FL 32952 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary John Curry 138 West Leon Lane Cocoa Beach, FL 32931 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Treasurer Pauline L. Bennett 2805 Matthew Drive Rockledge, FL 32955 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Director Eugene Stone 1339 Forest Drive Rockledge, FL 32955 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Membership Ch. Joann Johnson 815 Levitt Parkway Rockledge, FL 32955 <input type="checkbox"/> Change <input checked="" 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: *Pauline L. Bennett* DATE **7-5-03** (321) 636-0668

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (4/03)