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May 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N96000001550 (0)

1. Corporation Name

SPACE COAST P.B.A., INC.



Principal Place of Business

Mailing Address

6767 NO. WICKHAM ROAD STE 400
MELBOURNE FL 32940

6767 NO. WICKHAM ROAD STE 400
MELBOURNE FL 32940-2025

2. Principal Place of Business

2a. Mailing Address

21 2960 Michigan Street
Suite, Apt. #, etc.

26 2960 Michigan Street
Suite, Apt. #, etc.

22 Melbourne, Florida
City & State

27 Melbourne, Florida
City & State

23 Melbourne, Florida
Zip Country

28 Melbourne, Florida
Zip Country

24 32904

25 Brevard

29 32904

30 Brevard

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
03/19/1996

3a. Date of Last Report
N/A

4. FEI Number

65-0656066

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes ☐ No ☒

10. Name and Address of New Registered Agent

81 Name

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

2960 Michigan Street

83

84 City

Melbourne

FL

85 Zip Code
32904

11. 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 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

TITLE President ☐ DELETE

NAME Randy J. Arleo
STREET ADDRESS 2960 Michigan Street
CITY-ST-ZIP Melbourne, Florida 32904

TITLE Vice-President ☐ DELETE

NAME Mark Laderwarg
STREET ADDRESS 2960 Michigan Street
CITY-ST-ZIP Melbourne, Florida 32904

TITLE Treasurer ☐ DELETE

NAME James H. Frazier
STREET ADDRESS 2960 Michigan Street
CITY-ST-ZIP Melbourne, Florida 32904

TITLE Director ☐ DELETE

NAME Gary Penna
STREET ADDRESS 2960 Michigan Street
CITY-ST-ZIP Melbourne, Florida 32904

TITLE Director ☒ DELETE

NAME David Andrews
STREET ADDRESS 6767 N. Wickham Road, Suite 400
CITY-ST-ZIP Melbourne, Florida 32940

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Secretary ☐ Change ☒ Addition

1.2 NAME Mike Casey
1.3 STREET ADDRESS 2960 Michigan Street
1.4 CITY-ST-ZIP Melbourne, Florida 32904

2.1 TITLE Director ☐ Change ☒ Addition

2.2 NAME Robert F. Kuwik
2.3 STREET ADDRESS 2960 Michigan Street
2.4 CITY-ST-ZIP Melbourne, Florida 32904

3.1 TITLE Director ☐ Change ☒ Addition

3.2 NAME Pat Naughton
3.3 STREET ADDRESS 2960 Michigan Street
3.4 CITY-ST-ZIP Melbourne, Florida 32904

4.1 TITLE Director ☐ Change ☒ Addition

4.2 NAME Gary Wood
4.3 STREET ADDRESS 2960 Michigan Street
4.4 CITY-ST-ZIP Melbourne, Florida 32904

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 or supplemental 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, changed, or on an attachment with an address.

CR2E037 (9/96)