## 2003 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT# N99000003828

Entity Name: SEA ROCKET CHAPTER OF FLORIDA, INC.

FILED Mar 28, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
1873 FOSSE WAY TITUSVILLE, FL 32796				708 WATERMILL DRIVE MERRITT ISLAND, FL 32952			
Current Mailing Address:				New Mailing Address:			
PO BOX 1095 COCA, FL 329231095				PO BOX 1095 COCOA, FL 329231095			
FEI Number:	52-3583536	FEI Number Applied For ( )	FEI Nun	nber Not Appli	cable ( )	Certificate of Stat	tus Desired ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
MEYER, SUZANNE 1873 FOSSE WAY TITUSVILLE, FL 32796 US				HENRY, BARBARA 708 WATERMILL DRIVE MERRITT ISLAND, FL 32952 US			
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: BARBARA HENRY				03/28/2003			
Electronic Signature of Registered Agent				Date			
OFFICERS AND DIRECTORS:				ADDITION	S/CHANGE	ES TO OFFICERS	AND DIRECTORS:
Title: Name: Address: City-St-Zip:	D () D HILL, GAIL 2155 REYNARD F MERRITT ISLAND	PL		Title: Name: Address: City-St-Zip:	HENRY, BAF 708 WATER		on
Title: Name: Address: City-St-Zip:	D () D MEYER, SUZANN 1873 FOSSE WA' TITUSVILLE, FL	E Y		Title: Name: Address: City-St-Zip:	SZUCHY, EI 2035 ROCKI		on
Title: Name: Address: City-St-Zip:	D () D DOLCI, FREDA 5450 JUDSON RO MERRITT ISLAND	DAD		Title: Name: Address: City-St-Zip:	BOUTILLIER	EDGE DRIVE	on
Title: Name: Address: City-St-Zip:	D () D BOUTILIER, MAR 6745 RIVEREDGE TITUSVILLE, FL	Y B E DR		Title: Name: Address: City-St-Zip:	HOLTEN, KA 5729 LORD		on
Title: Name: Address: City-St-Zip:	D () D HILL, GAIL 2155 REYNARD F MERRITT ISLAND	PLACE		Title: Name: Address: City-St-Zip:		( ) Change ( ) Additio	n

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KATRINA HOLTEN D 03/28/2003