

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

Apr 29, 2001 08:00 AM
Secretary of State

DOCUMENT # N99000004008

1. Entity Name
 SPACE COAST INTERNET ALLIANCE, INC.

Principal Place of Business 200 OCEAN AVE #202 MELBOURNE BEACH 32951 US	FL	Mailing Address 200 OCEAN AVE #202 MELBOURNE BEACH 32951 US	FL
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2. Principal Place of Business	3. Mailing Address		
Suite, Apt. #, etc.	Suite, Apt. #, etc.		
City & State	City & State		
Zip	Country	Zip	Country

4. FEI Number
59-3598270

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

PHELAN SEAN
 200 OCEAN AVE
 STE 202
 MELBOURNE BEACH FL
 32951

7. Name and Address of New Registered Agent

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

SIGNATURE SEAN PHELAN DATE 04/29/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW:
FEE IS \$61.25

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	D	<input type="checkbox"/> Delete
NAME	SCHUERGER CHARLES	
STREET ADDRESS	950 LEVITT PKWY	
CITY-ST-ZIP	ROCKLEDGE FL 32955	
TITLE	D	<input type="checkbox"/> Delete
NAME	DODD WARREN	
STREET ADDRESS	1801 N WICKHAM RD STE 5	
CITY-ST-ZIP	MELBOURNE FL 32935	
TITLE	D	<input type="checkbox"/> Delete
NAME	DOWLING GEORGE	
STREET ADDRESS	249 POINCIANA DR	
CITY-ST-ZIP	INDIAN HARBOUR FL 32937	
TITLE	VD	<input type="checkbox"/> Delete
NAME	JONES ROBERT	
STREET ADDRESS	206 SAND DOLLAR RD	
CITY-ST-ZIP	INDIALANTIC FL 32903	
TITLE	STD	<input type="checkbox"/> Delete
NAME	AWTREY HALA	
STREET ADDRESS	781 MARSAILLE DR STE D	
CITY-ST-ZIP	INDIALANTIC FL 32903	
TITLE	PD	<input type="checkbox"/> Delete
NAME	PHELAN SEAN	
STREET ADDRESS	200 OCEAN AVE STE 202	
CITY-ST-ZIP	MELBOURNE BEACH FL 32951	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	VD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HALL STEPHEN	
STREET ADDRESS	4425 CROOKED MILE ROAD	
CITY-ST-ZIP	MERRITT ISLAND FL 32952	
TITLE	STD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AWTREY HALA	
STREET ADDRESS	680 BENTON DRIVE	
CITY-ST-ZIP	MELBOURNE FL 32901	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> 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)(f), 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: Sean Phelan P DATE: 04/29/2001

CR2E037 (11/00)