

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 07, 2002 8:00 am
Secretary of State

04-07-2002 90047 042 ***150.00

018447 AV

DOCUMENT #	P00000043442
1. Entity Name ESR OF BREVARD, INC.	

Principal Place of Business 5400 SAND LAKE DRIVE MELBOURNE FL 32934	Mailing Address 5400 SAND LAKE DRIVE MELBOURNE FL 32934
--	--



DO NOT WRITE IN THIS SPACE

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 59-3647153	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	
ROSE, CHERYL 5400 SAND LAKE DRIVE MELBOURNE FL 32934	

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

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. <input type="checkbox"/> (See criteria on back)	FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
---	---	---

11. OFFICERS AND DIRECTORS	
TITLE	NAME
P	ROSE, CHERYL
5400 SAND LAKE	5400 SAND LAKE
MELBOURNE FL 32934	MELBOURNE FL 32934
D	ROSE, STEVEN P
5400 SAND LAKE	5400 SAND LAKE
MELBOURNE FL 32934	MELBOURNE FL 32934
VP	EDWIN W. D. ROSE JR.
5400 SAND LAKE DRIVE	5400 SAND LAKE DRIVE
MELBOURNE, FLORIDA 32934	MELBOURNE, FLORIDA 32934

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	NAME

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered

SIGNATURE:	3-28-02	221-254-1495
Cheryl Rose	Date	Daytime Phone #
Cheryl Rose		

CR2E034 (9/01)