

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 29, 2005 8:00 am
Secretary of State

07-29-2005 90012 004 ***150.00

DOCUMENT # P02000078519

1. Entity Name
BREVARD HOME BUYERS, INC.



Principal Place of Business
**457 MONTREAL AVE
MELBOURNE, FL 32935**

Mailing Address
**457 MONTREAL AVE
MELBOURNE, FL 32935**

50058497



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

07152005

Chg-P

CR2E034 (10/03)

City & State

City & State

4. FEI Number
33-1043852

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**SCHRADER, FRANK D
457 MONTREAL AVE
MELBOURNE, FL 32935**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 7, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DPV
SCHRADER, FRANK D
457 MONTREAL AVE
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**ST
SCHRADER, FRANK D
457 MONTREAL AVE
MELBOURNE, FL 32935** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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CITY-ST-ZIP ☐ Delete

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CITY-ST-ZIP ☐ Delete

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STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7-25-05

Date

321-254-0688

Daytime Phone #



ATTACHMENT
50058497
Division of Corporations

Annual Report

Annual Report Help

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Business Entity Name

BREVARD HOME BUYERS, INC.

☒ After May 1st of each year, a late charge of \$400.00 is imposed, except in circumstances in which the entity did not receive prior notice. Please check this box if filing after May 1st and notice was not received.

FEI Number	331043852		
FEI Number Status	Applied For	Not Applicable	Current
Certificate of Status Desired	Yes	No	\$8.75 each
Election Campaign Financing Trust Fund Contribution	Yes	No	

Principal Place of Business

Address **457 MONTREAL AVE**
Suite, Apt. #, etc.
City, State **MELBOURNE**, FL
Zip Code & Country **32935**

Mailing Address

Address **457 MONTREAL AVE**
Suite, Apt. #, etc.
City, State **MELBOURNE**, FL
Zip Code & Country **32935**

Name And Address of Registered Agent

Name (Last, First, Middle, Title) **SCHRADER, FRANK, D**

-or- RA Business Name

Address (PO Box is not acceptable) **457 MONTREAL AVE**

Suite, Apt. #, etc.

City, State **MELBOURNE** , FL

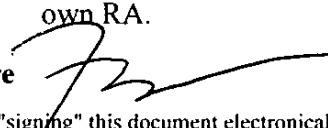
Zip Code & Country 32935 US

If there is a change in registered agent, the new agent will need to type their name in the 'Registered Agent Signature' block below to accept the designation of registered agent. RA signature must be an individual name. If the RA is a business

ATTACHMENT

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entity, an individual must sign on their behalf. A business entity cannot serve as its own RA.

Registered Agent Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes.

Officer/Director Name And Address

Title DPV
Name (Last, First, Middle, Title) SCHRADER, FRANK, D,
-or- Entity Name
Street Address 457 MONTREAL AVE
City, State MELBOURNE, FL
Zip Code & Country 32935
Title ST
Name (Last, First, Middle, Title) SCHRADER, FRANK, D,
-or- Entity Name
Street Address 457 MONTREAL AVE
City, State MELBOURNE, FL
Zip Code & Country 32935
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country
Title
Name (Last, First, Middle, Title)
-or- Entity Name
Street Address
City, State
Zip Code & Country

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Title

Name (Last, First, Middle, Title)

-or- Entity Name

Street Address

City, State

Zip Code & Country

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title owne

Officer/Director Signature **frank schrader**

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual. otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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