

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000052842 (8)

1. Corporation Name

BREVARD ASSOCIATED COURT SERVICES, INC.

Principal Place of Business

26 EAST NELSON STREET
MELBOURNE FL 32935

Mailing Address

26 EAST NELSON STREET
MELBOURNE FL 32935



2. Principal Place of Business

2a. Mailing Address

21 26 Nelson Av.

26 26 Nelson Av

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 Melbourne, FL

28 Melbourne, FL

Zip

Zip

24 32935

25 Brevard

29 32935

30 Brevard

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

07/03/1995

3a. Date of Last Report

4. Fee Number
59-3323190

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

KRASNY, SCOTT
780 SO. APOLLO BLVD.
MELBOURNE FL 32901

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature typed in plain text and signed by the applicant

(The Office Registered Agent's signature is required when requesting a change.)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D KING, STEPHEN P
STREET ADDRESS 26 EAST NELSON STREET
CITY-STATE-ZIP MELBOURNE FL 32935

TITLE ☐ DELETE

NAME D RYAN, GERARD F
STREET ADDRESS 1040 SO. FLORIDA AVENUE
CITY-STATE-ZIP ROCKLEDGE FL 32955

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

D King, Shirley P.
26 Nelson Av.
Melbourne, FL 32935

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-03/22/96--01041--007
***200.00

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3-22

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Shirley P. King

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96 407/242-8080

CR2E034 (12/95)