3-25-97 B-3525 C

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Secretary of State

PROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **P95000089106 (5)**

1. Corporation Name
SPACECOAST MANUFACTURING CO. INC.

Principal Place of Business	Mailing Address
107 S PARK AVE TITUSVILLE FL 32796	107 S PARK AVE TITUSVILLE FL 32796-3377

3. Date Incorporated or Qualified: 11/20/1995	3a. Date of Last Report: 05/01/1996
4. FEI Number: 59-3345317	☐ 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	

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

WAHLSTEDT, SONIA J
107 S PARK AVE
TITUSVILLE FL 32796

10. Name and Address of New Registered Agent

81 Name: MICHAEL G YANKO
82 Street Address (P.O. Box Number is Not Acceptable): 107 S PARK AVE
83
84 City: TITUSVILLE FL 85 Zip Code: 32796

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: MICHAEL G. YANKO PRES. DATE: 1/10/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	☒ DELETE	1.1 TITLE	President	☒ Change ☐ Addition
NAME	ROSS, ROBERT F		1.2 NAME	YANKO, Michael G	
STREET ADDRESS	3785 SAWGRASS RD		1.3 STREET ADDRESS	~~6265 Betty Ave~~ 6290 Marcy ST.	
CITY-ST-ZIP	TITUSVILLE FL 32780		1.4 CITY-ST-ZIP	Port St John FL 32927	
TITLE	V	☐ DELETE	2.1 TITLE	Vice President	☐ Change ☒ Addition
NAME	YANKO, MICHAEL G		2.2 NAME	McNAMARA, ROBERT J	
STREET ADDRESS	6265 BETTY AVE		2.3 STREET ADDRESS	6290 MARCY ST	
CITY-ST-ZIP	PT ST JOHN FL 32927		2.4 CITY-ST-ZIP	Port St John FL. 32927	
TITLE	DST	☐ DELETE	3.1 TITLE	Sec.-Treas	☐ Change ☐ Addition
NAME	WAHLSTEDT, SONIA J		3.2 NAME	WAHLSTEDT, Sonia S.	
STREET ADDRESS	1405 FIDDLER AVE		3.3 STREET ADDRESS	1405 Fiddler Ave	
CITY-ST-ZIP	MERRITT ISLAND FL 32952		3.4 CITY-ST-ZIP	Merritt Island FL. 32952	
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E034 (9/96)

14. I do 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 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: Michael Yanko Michael YANKO 1-10-97 407 268 0306
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0077575