

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Sep 10, 2004 8:00 am
Secretary of State

09-10-2004 90002 031 ***150.00

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1. Entity Name
FLORIDA PROPERTIES OF BREVARD, INC.



Principal Place of Business
 1300 ARMSTRONG DR
 STE 103
 TITUSVILLE, FL 32780

Mailing Address
 PO BOX 5868
 TITUSVILLE, FL 32783

54072320



03102004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number **59-3506086** Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

AMERICA LAWYER
 343 ALMERIA AVENUE
 CORAL GABLES, FL 33134
Joseph C Casale
1300 Armstrong Dr
Titusville, FL 32780

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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 *Joseph C Casale* DATE *9/25/04*
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Did not receive form

10. OFFICERS AND DIRECTORS

TITLE	PSTD
NAME	CASALE, JOSEPH C
STREET ADDRESS	1300 ARMSTRONG DR
CITY-ST-ZIP	TITUSVILLE, FL 32780
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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 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: *Joseph C Casale* DATE *9/25/04* 321-268-0444
Signature and typed or printed name of signing officer or director Daytime Phone #