2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2007
Secretary of State

DOCUMENT# 687881

Entity Name: DELTONA RECREATION, INC.

Current Principal Place of Business:

595 HWY 92 EAST
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

595 HWY 92 EAST
DELAND, FL 32724

New Mailing Address:

FEI Number: 59-2028965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONGO, PETER W VP
1502 WEST SILVER HAMMOCK
DELAND, FL 32720 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LONGO, LOUIS P
Address: 1395 TALL OAKS RD.
City-St-Zip: DELAND, FL 32720

Title: V ( ) Delete
Name: LONGO, PETER W
Address: 1502 WEST SILVER HAMMOCK
City-St-Zip: DELAND, FL 32720

Title: T ( ) Delete
Name: FOLI, TIMOTHY J
Address: 1003 HILLTOP LANE
City-St-Zip: KODAK, TN 37764

Title: S ( ) Delete
Name: GOODWIN, JOSEPH W
Address: 496 WILTSHIRE BLVD
City-St-Zip: PORT ORANGE, FL 32127

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change ( ) Addition
Name: FOLI, TIMOTHY J
Address: 525 TIMBERLINE DRIVE
City-St-Zip: LENOIR CITY, TN 37772

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PETER W LONGO VP 04/20/2007

Electronic Signature of Signing Officer or Director — Date