

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 28 PM 6:53

DOCUMENT # **721689** (8)

1. Corporation Name

THE GREATER DAYTONA BEACH COIN CLUB, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

Mailing Address

BOX 291692
PORT ORANGE FL 32129

BOX 291692
PORT ORANGE FL 32129

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified 09/13/1971	3a. Date of Last Report 02/17/1994
4. FEI Number 59-2379512	Applied For Not Applicable

2. Principal Place of Business	2a. Mailing Address	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
22. City & State	27. City & State	7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	\$68.75 Supplemental Fee Not Required
23. Zip	28. Zip	8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
24. Country	29. Country		
25. Country	30. Country		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KEFFER, CHARLIE
720 LA GRANGE AVE.
PORT ORANGE FL 32129

81. Name C.L. Wyatt	
82. Street Address (P.O. Box Number is Not Acceptable) 140 W. International Speedway Blvd	
83. City	
84. City Daytona Beach	85. Zip Code FL 32114

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 607.0502, Florida Statutes.

SIGNATURE: *[Signature]* DATE: **4/19/95**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OVEREEM, PETE	1.2 NAME	
STREET ADDRESS	2280 OLD SAMSULA RD.	1.3 STREET ADDRESS	
CITY - ST - ZIP	DAYTONA BEACH FL	1.4 CITY - ST - ZIP	
TITLE	D	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MOORE, TIM	2.2 NAME	
STREET ADDRESS	5434 SYDNEY ST.	2.3 STREET ADDRESS	
CITY - ST - ZIP	PORT ORANGE FL	2.4 CITY - ST - ZIP	
TITLE	D	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NELSON, HOWARD	3.2 NAME	Clarence Allan
STREET ADDRESS	28 LINDEN FALLS DR.	3.3 STREET ADDRESS	1745 John Anderson Dr.
CITY - ST - ZIP	ORMOOND BEACH FL	3.4 CITY - ST - ZIP	Ormond Beach, FL 32176
TITLE	D	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LINDSEY, CLYDE	4.2 NAME	C.L. Wyatt
STREET ADDRESS	1194 PELLICIER CT.	4.3 STREET ADDRESS	140 W. International Speedway Blvd
CITY - ST - ZIP	PORT ORANGE FL	4.4 CITY - ST - ZIP	Daytona Beach, FL 32114
TITLE	D	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEONE, JOE	5.2 NAME	Cindy Sober
STREET ADDRESS	3053 EAGLE PASS TRAIL	5.3 STREET ADDRESS	4529 Nettle Creek Ct.
CITY - ST - ZIP	DELAND FL	5.4 CITY - ST - ZIP	Port Orange, FL 32119
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOHR, JEFFREY	6.2 NAME	
STREET ADDRESS	4529 NETTLE CREEK COURT	6.3 STREET ADDRESS	
CITY - ST - ZIP	PORT ORANGE FL	6.4 CITY - ST - ZIP	

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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or in an attachment with this filing.

SIGNATURE: *[Signature]* DATE: **4/19/95**