2000 UNIFORM BUSINESS REPORT (UBR)

8/

DOCUMENT # 721689

1. Entity Name

THE GREATER DAYTONA BEACH COIN CLUB, INC.

FILED
Sep 18, 2000 8:00 am
Secretary of State

08-23-2000 90031 049 ****61.25

Principal Place of Business	Mailing Address
BOX 291692 PORT ORANGE FL 32129	BOX 291692 PORT ORANGE FL 32129

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2379512 — Applied For / Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
WYATT, CL 633 INTERNATIONAL SPEEDWAY BLVD WEST DAYTONA BEACH FL 32114	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
After September 13, 2000 min. will be $236.25

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

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S CLEMENS, ELAINE D 305 FIRST ST ORMOND BEACH FL 32174 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T OUTZEN, PAUL 21 PROVIDENCE LANE PALM COAST FL 32164 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	office VACANT AT THIS TIME ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KEFFER, CHARLES 720 LA GRANGE AVE PORT ORANGE FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P WYATT, CL 140 W INTERNATIONAL SPEEDWAY BLVD DAYTONA BEACH FL 32114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	To DIRECTOR ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HAWES, BOB 2101 DEBBY PLACE DAYTONIA BEACH FL 32119 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	To PRESIDENT ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP LAFRANCE, ELISSA D 1436 SUWANEE RD. DAYTONA BEACH FL 32114 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DIRECTOR ☐ Change ☐ Addition

CR2E037 (5/00)

12. I 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 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 617, 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: SIGNATURE REQUIRED — 8/21/00 — 904-788-8040

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #