

FILE NOW: FILING FEE IS \$61.25

FILED

May 16 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 726241 (3)

1. Corporation Name

2625 PLAZA MANAGEMENT CORPORATION, INC.



Principal Place of Business

Mailing Address

2625 S. ATLANTIC AVE  
DAYTONA BCH. FL 32118-5615  
US

2625 S. ATLANTIC AVE  
DAYTONA BCH. FL 32118-5615  
US

3. Date Incorporated or Qualified  
04/26/1973

3a. Date of Last Report  
01/24/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number  
59-1537362

Applied For  
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

6. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHRISTENSEN, DICK  
2625 SOUTH ATLANTIC AVENUE  
DAYTONA BEACH FL 32118

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P  DELETE  
NAME COALSON, HAROLD  
STREET ADDRESS 2625 SOUTH ATLANTIC AVENUE  
CITY-ST-ZIP DAYTONA BEACH SHORES FL

1.1 TITLE P/D  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME SORG, JAMES  
STREET ADDRESS 2625 S. ATLANTIC AVE  
CITY-ST-ZIP DAYTONA BEACH SHORES FL

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE S  DELETE  
NAME KUEHNE, MARY JEAN  
STREET ADDRESS 2625 S. ATLANTIC AVE.  
CITY-ST-ZIP DAYTONA BCH.SH. FL

3.1 TITLE S/D  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE T  DELETE  
NAME VALERIUS, BILL  
STREET ADDRESS 2625 S. ATLANTIC AVE.  
CITY-ST-ZIP DAYTONA BCH.SH. FL

4.1 TITLE VP/D  Change  Addition  
4.2 NAME RUTH POLLITT  
4.3 STREET ADDRESS 2625 S ATLANTIC AVE  
4.4 CITY-ST-ZIP DAYTONA BCH SH FL

TITLE D  DELETE  
NAME PECK, HILDA  
STREET ADDRESS 2625 S. ATLANTIC AVE.  
CITY-ST-ZIP DAYTONA BCH.SH. FL

5.1 TITLE T/D  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME POPPEL, RICHARD  
STREET ADDRESS 2625 S. ATLANTIC AVE.  
CITY-ST-ZIP DAYTONA BCH.SH. FL

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Mary Jean Kuehne*  
SIGNATURE AND TYPED OR PRINTED NAME OF FILING OFFICER OR DIRECTOR

4-25-97

Date

Daytime Phone #00000000

CR2E037 (9/96)