

**2002 UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Mar 18, 2002 8:00 am**  
**Secretary of State**

03-18-2002 90065 022 \*\*\*\*61.25

**DOCUMENT # 763692**

1. Entity Name

**EXECUTIVE ASSOCIATION OF DAYTONA BEACH, INC.**

Principal Place of Business

Mailing Address

50 SANDRA DR.  
 ORMOND BEACH FL 32176  
 US

50 SANDRA DR.  
 ORMOND BEACH FL 32176  
 US

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

**59-3023144**

Applied For

Not Applicable

5. Certificate of Status Desired

**\$8.75** Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRETZ, SCOTT

~~562 N RIDGEWOOD AVE~~ **135 E Int'l Spdwy Blvd #9**  
 DAYTONA BEACH FL ~~32114~~ **32118**

Name

Street Address (P.O. Box Number is Not Acceptable) **135 E. INTL SPEEDWAY BLVD., #9**

DAYTONA BEACH, FL 32118

City DAYTONA BEACH

FL

Zip Code 32118

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**

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  Delete  
 NAME **D BALABAN, LYNN**  
 STREET ADDRESS **433 SILVER BEACH AVE 101**  
 CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D STARK, DAVE**  
 STREET ADDRESS **570 S. U.S. #1**  
 CITY-ST-ZIP **ORMOND BEACH FL**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D FRETZ, SCOTT**  
 STREET ADDRESS ~~532 N RIDGEWOOD AVE~~ **135 E. INT'L Spdwy Blvd #9**  
 CITY-ST-ZIP ~~DAYTONA BEACH FL 32114~~ **32118**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS **135 E. INTL SPEEDWAY BLVD., #9**  
 CITY-ST-ZIP **DAYTONA BEACH, FL 32118**

TITLE  Delete  
 NAME **T UNDERWOOD, PATTY**  
 STREET ADDRESS **50 SANDRA DR.**  
 CITY-ST-ZIP **ORMOND BEACH FL 32176**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **P CAGLE, CHRISTY**  
 STREET ADDRESS **140 S ATLANTIC AVENUE**  
 CITY-ST-ZIP **ORMOND BEACH F**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

TITLE  Delete  
 NAME **D DEVERREAU, ROBERT**  
 STREET ADDRESS **200 SOUTH RIDGEWOOD AVENUE**  
 CITY-ST-ZIP **DAYTONA BEACH FL**

TITLE  Change  Addition  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

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:

*Scott Fretz*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**3/6/02**  
 Date

**386-253-4539**  
 Daytime Phone #

CR2E037 (9/01)