2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jan 26, 2009
Secretary of State

DOCUMENT# N04000001889

Entity Name: DAYTONA STATE COLLEGE, INC.

Current Principal Place of Business:

1200 WEST INTERNATIONAL SPEEDWAY BLVD
DAYTONA BCH, FL 321202811

New Principal Place of Business:

Current Mailing Address:

1200 WEST INTERNATIONAL SPEEDWAY BLVD
DAYTONA BCH, FL 321202811

New Mailing Address:

FEI Number: 59-1211226 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPIWAK, RAND S DR
1200 WEST INTERNATIONAL SPEEDWAY BOULEVARD
DAYTONA BEACH, FL 32114 US

Name and Address of New Registered Agent:

BABB, BRIAN
1200 WEST INTERNATIONAL SPEEDWAY BOULEVARD
DAYTONA BEACH, FL 32114 US

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: BRIAN BABB 01/26/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: VCD ( ) Delete
Name: BENNETT, MARY G
Address: 1051 SHORE BLVD. #805
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete
Name: MALLORY, PETER E
Address: 629 ST. ANDREWS CIR
City-St-Zip: NEW SMYRNA BEACH, FL 32169

Title: D ( ) Delete
Name: MILES, STEVEN G
Address: 33 FOREST VIEW WAY
City-St-Zip: ORMOND BEACH, FL 32176

Title: CD ( ) Delete
Name: PETROCK, JOSEPH C
Address: 112 PAUMA VALLEY CT.
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete
Name: GRAHAM, JOHN
Address: 11A BUCKSKIN LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete
Name: DAVIDSON, WILLIAM H
Address: 10 MAGNOLIA LN
City-St-Zip: ORMOND BCH, FL 321749200

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN BABB GENE 01/26/2009
Electronic Signature of Signing Officer or Director — Date