

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90088 001 ****61.25

DOCUMENT # N95000004690

1. Entity Name

**THE DAYTONA BEACH MAIN STREET MERCHANT'S
ASSOCIATION, INC.**



Principal Place of Business

**618 MAIN STREET
DAYTONA BEACH FL 32118**

Mailing Address

**618 MAIN STREET
DAYTONA BEACH FL 32118**

24007050



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

Zip

Country

Zip

Country

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

**GUEST, TOM
618 MAIN STREET
DAYTONA BEACH FL 32118**

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. I am familiar with, and accept the obligations of registered agent.

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
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BEACH PHOTO & VIDEO**
STREET ADDRESS **604 MAIN STREET**
CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE **D** ☒ Delete
NAME **BUCKLE AND HYDE**
STREET ADDRESS **514 MAIN STREET**
CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE **D** ☒ Delete
NAME **CORBIN SADDLES**
STREET ADDRESS **504 MAIN STREET**
CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE **D** ☐ Delete
NAME **BOOTHILL SALOON**
STREET ADDRESS **310 MAIN STREET**
CITY-ST-ZIP **DAYTONA BEACH FL 32118**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **FRAGGIES SALOON**
STREET ADDRESS **800 MAIN STREET**
CITY-ST-ZIP **Daytona Beach, FL 32118**

TITLE **D** ☐ Change ☒ Addition
NAME **Hot Leathers**
STREET ADDRESS **801 MAIN ST.**
CITY-ST-ZIP **Daytona Beach, FL 32118**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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: *Tom Guest*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-04
Date

386-252-1922
Daytime Phone #