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Sep 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N97000000689 (6)
1. Corporation Name
THE GREATER DAYTONA/HALIFAX PARENTS WITHOUT PARTNERS, INC.



Principal Place of Business: P O BOX 11311 DAYTONA BEACH FL 32120-1311
Mailing Address: P O BOX 11311 DAYTONA BEACH FL 32120-1311

3. Date Incorporated or Qualified: 02/05/1997
4. FEI Number: 59-3244285
Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields for Suite, Apt. #, City & State, and Zip/Country.

5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? [X] Yes [] No
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. [] Yes [X] No NA

9. Name and Address of Current Registered Agent
**TOBIN, JAMES H
2800 N ATLANTIC AVE #703
DAYTONA BEACH FL 32118**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and Zip Code (FL).

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 617.0502, Florida Statutes.
SIGNATURE: James H. Tobin (Signature) / 1/11/98 (Date)
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	P	DELETE
NAME	TOBIN, JAMES H	
STREET ADDRESS	2800 N ATLANTIC AVE #703	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	V	DELETE
NAME	WINTERS, DOREEN	
STREET ADDRESS	99 OAK AVE	
CITY-ST-ZIP	ORMOND BEACH FL 32174	
TITLE	S	DELETE
NAME	PELKEY, ALICE	
STREET ADDRESS	646-B WEGA BLVD	
CITY-ST-ZIP	HOLLY HILL FL 32117	
TITLE	T	DELETE
NAME	PANE, BARBARA	
STREET ADDRESS	291 SAGEWOOD DR	
CITY-ST-ZIP	PT ORANGE FL 32119	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	ADMINISTRATIVE V.P.	Change	Addition
1.2 NAME	ANN ARNOLD		
1.3 STREET ADDRESS	1709 QUEEN PALM DR		
1.4 CITY-ST-ZIP	EDGEWATER, FL 32132		
2.1 TITLE	VICE PRESIDENT MEMBERSHIP	Change	Addition
2.2 NAME	DIANE EYRE		
2.3 STREET ADDRESS	26 STRATFORD PLACE		
2.4 CITY-ST-ZIP	ORMOND BEACH, FL 32174		
3.1 TITLE	SECRETARY	Change	Addition
3.2 NAME	LISA GUNDRAM ANNE SHERIDAN		
3.3 STREET ADDRESS	6 FISHERMAN DR #5		
3.4 CITY-ST-ZIP	ORMOND BEACH, FL 32174 DAYTONA BEACH, FL 32117		
4.1 TITLE	TREASURER	Change	Addition
4.2 NAME	KIM SICLER		
4.3 STREET ADDRESS	576 CAMBRIDGE CIR		
4.4 CITY-ST-ZIP	SOUTH DAYTONA, FL 32119		
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

14. 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 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: James H. Tobin (Signature) / 1/11/98 (Date) / 904/673-5222 (Phone)

CR2E037 (10/97)