

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N99000007117

FILED
Mar 04, 2003
Secretary of State

Entity Name: HAWAIIAN INN BEACH RESORT CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2301 S. ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32118

New Principal Place of Business:

2301 S. ATLANTIC AVE
CONDOMINIUM ASSOCIATION OFFICE
DAYTONA BEACH SHORES, FL 32118

Current Mailing Address:

2301 S. ATLANTIC AVE
DAYTONA BEACH SHORES, FL 32118

New Mailing Address:

FEI Number: 59-3575262 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAINEY, JOHN A
2101 JOHN ANDERSON DRIVE
ORMOND, FL 32176

Name and Address of New Registered Agent:

MATRICIA, DANIEL J
2301 S. ATLANTIC AVE
CONDOMINIUM ASSOCIATION OFFICE
DAYTONA BEACH SHORES, FL 32118

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: DANIEL J. MATRICIA

03/04/2003

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HIRSCH, HERBERT
Address: 2101 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND, FL 32176

Title: VPD () Delete
Name: MATRICIA, DANIEL
Address: 1768 REGATTA DRIVE
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: STD () Delete
Name: RAINEY, CHRISTA
Address: 2101 JOHN ANDERSON DRIVE
City-St-Zip: ORMOND, FL 32176

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: MATRICIA, DANIEL J
Address: 2301 S. ATLANTIC AVE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118

Title: VPD (X) Change () Addition
Name: WARD, RON
Address: 2301 S. ATLANTIC AVE
City-St-Zip: DAYTONA BEACH SHORES, FL 32118

Title: STD (X) Change () Addition
Name: RINEHART, SHERRY
Address: 2301 S. ATLANTIC AVE.
City-St-Zip: DAYTONA BEACH SHORES, FL 32118

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DANIEL MATRICIA

PD

03/04/2003

Electronic Signature of Signing Officer or Director

Date