

**2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N13000005361

**FILED**  
**Jan 11, 2018**  
**Secretary of State**  
**CC0876437407**

**Entity Name:** DAYTONA DREAM CENTER, INC.

**Current Principal Place of Business:**

1687 W. GRANADA BLVD  
ORMOND BEACH, FL 32174

**Current Mailing Address:**

1687 W. GRANADA BLVD  
ORMOND BEACH, FL 32174

**FEI Number: 46-2986208**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MCCOY, TROY  
255 WOODHAVEN CIS W  
ORMOND BEACH, FL 32174 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title PD  
Name RALEY, JR., JAMES D  
Address 1687 W. GRANADA BLVD  
City-State-Zip: ORMOND BEACH FL 32174

Title TD  
Name MCCOY, TROY  
Address 1687 W. GRANADA BLVD  
City-State-Zip: ORMOND BEACH FL 32174

Title SD  
Name WOODS, JENNIFER  
Address 1687 W. GRANADA BLVD  
City-State-Zip: ORMOND BEACH FL 32174

*I hereby 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 all other like empowered.*

**SIGNATURE: TROY MCCOY**

**TD**

**01/11/2018**

Electronic Signature of Signing Officer/Director Detail

Date