## 2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N43077

Entity Name: CINEMATIQUE OF DAYTONA, INC.

**Current Principal Place of Business:** 

242 S. BEACH STREET DAYTONA BEACH, FL 32114

**Current Mailing Address:** 

P. O. BOX 1105

DAYTONA BEACH, FL 32115

FEI Number: 59-3056941 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AYRES, ALEXANDRA 242 S. BEACH STREET 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: ALEXANDRA AYRES 06/13/2019

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **BOARD MEMBER** Title BOARD MEMBER BONNER, DAVITA DOUMAS, JAMES Name Name

3446 GELDING COURT Address 1785 S. CLYDE MORRIS #102 Address

PORT ORANGE FL 32129 DAYTONA BEACH FL 32119 City-State-Zip: City-State-Zip:

Title **BOARD MEMBER** Title **PRESIDENT** Name PEACOCK, JACKIE KOPALD, SUSAN Name

Address 1432 S. PENNINSULA DR. Address 1420 N. ATLANTIC AVE

1603

City-State-Zip:

DAYTONA BEACH FL 32118 City-State-Zip: DAYTONA BEACH FL 32118 City-State-Zip:

Title **BOARD MEMBER** Title THEATER MANAGER Name HUNT, KENNETH

Name AYRES, ALEXANDRA Address 2828 N. ATLANTIC AVENUE Address 242 S BEACH STREET

City-State-Zip: DAYTONA BEACH FL 32114

EDGEWATER FL 32141

Title **BOARD MEMBER** VICE PRESIDENT / TREASURER Title

Name MOJER, LINDA 500 HEALTH BLVD.

Address Address 319 LEANING OAK DRIVE

City-State-Zip: ORMOND BEACH FL 32174

Continues on page 2

City-State-Zip:

Name

DAYTONA BEACH FL 32118

TAPIA-SANTIAGO, CECILLE

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.

06/13/2019 SIGNATURE: ALEXANDRA AYRES MANAGER

Electronic Signature of Signing Officer/Director Detail

Date

**FILED** Jun 13, 2019

**Secretary of State** 

0318711298CC

Date

## Officer/Director Detail Continued:

Title BOARD MEMBER
Name DUNKEL, LEE

Address 94 ORMOND PARKWAY
City-State-Zip: ORMOND FL 32174