

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 255517**

1. Entity Name

VOLUSIA PENNSAVER, INC.**FILED****Feb 08, 2000 8:00 am**
Secretary of State

02-08-2000 90035 030 ***150.00

Principal Place of Business

Mailing Address

901 SIXTH STREET
P.O. BOX 2831
DAYTONA BEACH FL 32120-9831901 SIXTH STREET
P.O. BOX 2831
DAYTONA BEACH FLA 32120-2831
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-2092636**

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required**6. Name and Address of Current Registered Agent****KANEY, GEORGIA M**
901 SIXTH ST
DAYTONA BEACH FL 32117**7. Name and Address of New Registered Agent**Name **David R. Kendall**Street Address (P.O. Box Number is Not Acceptable)
901 Sixth StreetCity **Daytona Beach****FL**Zip Code
32117

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.

David R. Kendall
SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/009. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back); ☒**FILE NOW!!! FEE IS \$150.00**
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State10. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees**11. OFFICERS AND DIRECTORS**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
PD	DAVIDSON JR, HERBERT M	901 6TH STREET	DAYTONA BEACH FL 32117	<input type="checkbox"/>
ASVD	COBB, THOMAS T	901 6TH STREET	DAYTONA BEACH FL 32117	<input type="checkbox"/>
ASVD	KANEY, GEORGIA M.	901 6TH ST	DAYTONA BCH FL 32117	<input type="checkbox"/>
SD	KANEY, JONATHAN D., JR.	901 6TH ST.	DAYTONA BCH. FL 32117	<input type="checkbox"/>
ASDT	DAVIDSON, MARC L.	901 6TH ST.	DAYTONA BCH. FL 32117	<input type="checkbox"/>
ASD	DAVIDSON TRUILO, JULIA	901 6TH ST	DAYTONA BEACH FL 32117	<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input checked="" type="checkbox"/> Addition
D	Robert Truilo	901 Sixth Street	Daytona Beach, FL 32117	<input type="checkbox"/>	<input checked="" type="checkbox"/>
VD	David R. Kendall	901 Sixth Street	Daytona Beach, FL 32117	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

13. 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/1/00 **904-252-1511**