FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT

1996

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

APPROVED AND FILED

1996 AUG 28 PM 12: 17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **295009** **(5)**

1. Corporation Name

DAYTONA BEACH FLA COMMERCIAL PROPERTIES DEVELOPMENT CORPORATION

Principal Place of Business
P.O. BOX 1693
BATON ROUGE LA 70821

Mailing Address
P.O. BOX 1693
BATON ROUGE LA 70821

2. Principal Place of Business
21
Suite, Apt. #, etc
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt. #, etc
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 07/20/1965
3a. Date of Last Report: 05/01/1995
4. FEI Number: 72-0605107 — Applied For ☐ Not Applicable ☐
5. Certificate of Status Desired: XX — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FRANK WOTITZKY
201 W MARION AVET
PUNTA GORDA FL 33950

10. Name and Address of New Registered Agent

81 Name: Fred C. Cohen
82 Street Address (P.O. Box Number is Not Acceptable): 712 U. S. Highway 1, Suite 400
83
84 City: North Palm Beach FL 85 Zip Code: 33408

11. Pursuant to the provisions of Section 607.0505 or 607.1008, 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 and the 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 607.325, Florida Statutes.

SIGNATURE: Fred C. Cohen — 8/27/96
Signature typed or printed name of registered agent or officer of corporation — (Note: Registered Agent signature required if new or resigning) — DATE

12. OFFICERS AND DIRECTORS

TITLE	P	☐ DELETE
NAME	MARVIN, WILBUR	
STREET ADDRESS	1906 BEAUMONT	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	S	☐ DELETE
NAME	LOVE, LOJEAN	
STREET ADDRESS	1906 BEAUMONT	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE	V	☐ DELETE
NAME	FARRELL, B. EUGENE	
STREET ADDRESS	1906 BEAUMONT	
CITY-ST-ZIP	BATON ROUGE LA	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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		☐ Change ☐ Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		400001543498:4
2.3 STREET ADDRESS		-08/28/96--01102--008
2.4 CITY-ST-ZIP		****383.75 ****383.75
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
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		

LSP 8/28/96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: B. Farrell — 8/26/96 — (504)924-7206
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
B. EUGENE FARRELL
Date — Daytime Phone #

CR2E034 (12/95)