

FILE NOW: FILING FEE IS \$61.25

FILED

May 20 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 706151 (8)

1. Corporation Name

THE UNIVERSITY CLUB OF VOLUSIA COUNTY INC.



Principal Place of Business

Mailing Address

POST OFFICE BOX 1586
518 S. LANVALE AVE.
DAYTONA BEACH FL 32115

POST OFFICE BOX 1586
518 S. LANVALE AVE.
DAYTONA BEACH FL 32115-1586

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified
09/13/1963

3a. Date of Last Report
05/01/1996

4. FEI Number
59-1027160

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$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

SEITZ, WILLIAM M
518 S LANVALE AVE
DAYTONA BEACH FL 32015

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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. Such 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 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE
NAME JOHNSON, ROBERT
STREET ADDRESS 9 ROCKEY CREEK TRAIL
CITY-ST-ZIP ORMOND BEACH FL

TITLE D ☒ DELETE
NAME CARTLEDGE, THOMAS H DR
STREET ADDRESS 417 N BEACH ST
CITY-ST-ZIP ORMOND BCH FL

TITLE S ☐ DELETE
NAME SEITZ, WILLIAM M
STREET ADDRESS 518 S LANVALE AVENUE
CITY-ST-ZIP DAYTONA BEACH, FL 0

TITLE D ☒ DELETE
NAME CHEW, JOHN C
STREET ADDRESS 925 N. HALIFAX AVE., #1006
CITY-ST-ZIP DAYTONA BCH FL

TITLE D ☐ DELETE
NAME SIDOR, GEORGE
STREET ADDRESS 105 SHADY BRANCH TR
CITY-ST-ZIP ORMOND BEACH FL

TITLE PD ☐ DELETE
NAME BANKER, RICK
STREET ADDRESS 107 ANCHOR DRIVE
CITY-ST-ZIP PONCE INLET FL

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 D Granville, Gerald
2.3 STREET ADDRESS 575 N. Nova Rd.
2.4 CITY-ST-ZIP Ormond Beach, FL 32174

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 D Cook, Sheryl
4.3 STREET ADDRESS 150 S. Beach St.
4.4 CITY-ST-ZIP Daytona Beach, FL 32114

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

14. I do 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E037 (9/96)