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NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

160 N BEACH ST



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 713154

(3)

DAYTONA BEACH FL 32115-0671

Mailing Address P O BOX 671

COUNCIL ON AGING OF VOLUSIA COUNTY, INC.

| _ | TONA BEACH | FL 32114 | | | DAYTONA BEACH FL 32115-0671 US | | | | | | | | | | |
|---|---|------------------|---------------------------------|------------------------------|-----------------------------------|--------------------|---|--|-----------------------------|---|---------------------------------------|----------|------------------|------------------------|--|
| US | | | | US | | | | | | 3. Date Incorporated or Qualified 08/04/1967 3a. Date of Last Report 03/07/1996 | | | | | |
| | Principal Pla | ice of Busir | ness | ļ ₁ | 2a. Mailing Address | | | | 4. F6 | Number 59-1160221 | | | - | Applied For | |
| Suite. Apt. #, etc. | | | | 26 Suite A | Suite, Apt. #, etc. | | | | | OS TIOUEET | | <u> </u> | | Not Applicable | |
| 22 | | | | | 27 | | | | 5 . Co | ertificate of Status | Desired | X | | Additional Required | |
| City & State | | | | | City & State | | | | 6. EI | ection Campaign I | Financing | | \$5.0 | May Be | |
| 23 | | | | 28 | 28 | | | Trust Fund Contribution | | | | to Fees | | | |
| | Zıp | | Country | Zip | | Country | | , | 8. Ti | is corporation has | liability for in | | | s. 199.032, | |
| 24 25 29 30 | | | | | | 30 | | | Florida Statutes 🔲 Yes 💢 No | | | | | | |
| 9. Name and Address of Current Registered Agent | | | | | | | | 10, Name and Address of New Registered Agent | | | | | | | |
| | | | | | | | 81 Name | | | | | | | | |
| CAMPUTARO, GAIL F. | | | | | | | 82 Street Address (P.O. Box Number is Not Acceptable) | | | | | | | | |
| 160 N BEACH STREET DAYTONA BCH FL 32114 | | | | | | | 83 | | | <u></u> | | | | | |
| | DATIONA | BOH FL | 32114 | | | | ا | | | | | | | | |
| | | | | | | [| 64 | City | | | | FL | 85 Zi | o Code | |
| 11 | . Pursuant te | the provis | ions of Sections 617.05 | 02 and 617,1508. | Florida Statu | tes, the ab | l | e-named c | orporation s | ubmits this statem | ent for the pu | roose of | changing | its registered | |
| | 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. | | | | | | | | | | | | | | |
| | _ | Tarrinat W | ini and accept the sen | gations of bootier | 017.0505, 71 | ionda Oldi | uioa | . | | | | | | | |
| 51 | GNATURE _ | Signature, Typed | or printed name of registered a | gent and title if applicable | . (NO | TE: Registered | Age | ent signature re | equired when rei | netating) | | DATE | | | |
| 12 | | | OFFICERS A | ND DIRECTORS | | 13. | | | AD | DITIONS/CHANG | S TO OFFIC | ERS AND | | | |
| TiT | LE | TD | | l | DELETE | 1.1 T(T | LE | | | | | | Change | Addition | |
| NA | ME | | s, TODD O. | | | . 1.2 NA | ME | | | | | | | | |
| STI | REET ADDRESS | | DGEWOOD AVE | | | 1.3 ST | AEET | ADDRESS | | | | | | | |
| - | Y-ST-ZIP | | A BEACH FL | | | 1.4 CIT | | T-ZIP | | ····· | ··· | | | 1 | |
| 111 | | SD | | ł | DELETE | 2.1 117 | | | | | | | Change | Addition | |
| NA | | | MAN, CHARLES J. | | | 2.2 NA | | | | | | | | | |
| ľ | REET ADDRESS | | BREEZE BLVD. | | | 1 | | ADDRESS | | | | | • • | | |
| 711 | Y-ST-ZIP | | A BCH. FL | | DELETE | 2. 4 CI 3.1 TII | | ST-ZIP | | | · · · · · · · · · · · · · · · · · · · | | Change | Addition | |
| NA | į. | SCHINAT OD | rz, ralph | , | VILLE | 3.2 NA | | | | | | | Chairy | Addition | |
| | REET ADDRESS | | TRESS BLVD | | | | | ADDRESS | | | | | | | |
| 1 | IY-SI-ZIP | | A BEACH FL | | | | | ST-ZIP | | | | | | | |
| 711 | | PD | A DENOTITE | | DELETE | 4.1 [1] | _ | 31-2# | | | | | Change | Addition | |
| NA | | OLIVARI, | JOHN | | | 4. 2 N | AME | | | | | | | _ | |
| | REET ADDRESS | | EBRUSH TRAIL | | | | | ADDRESS | | | | | | | |
| | Y-ST-ZIP | | BEACH FL | | | 4.4 CI | ry-s | ST-21P | | | | | | | |
| TiT | i.E | | | | DELETE | 5.1 TI | | | | | | | Chang | Addition | |
| ₽A | ME | | | | | 5.2 NA | ME | | | : | | | | | |
| ST | REET ADDRESS | | | | | 5.3 ST | REET | ADDRESS | | | | | | | |
| CIT | Y · ST · ZIP | | | | | 5.4 CI | TY-S | ST-21P | | · | | | | | |
| ΤII | ιE | | | | DELETE | 6.1 Tri | LLE | | | | | | Change | Addition | |
| NA. | ME | | | | | 6.2 NA | ME | | | | | | | | |
| ST | REET ADDRESS | | | | | 6.3 ST | REET | T ADDRESS | | | | | | | |
| | IY-ST-ZIP | | | | | | | ST-ZIP | | 118 25 25 27 | | | | | |
| 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; this 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. | | | | | | | | | | | | | inder oath; that | | |
| S | JGNAT | URE: | John Oliva | rt John | Olib | اااللا | |) | | 2/7/9- |) (9 | 04) 6 | 72-07 | 775 | |