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Secretary of State

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FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

NONPROFIT
CORPORATION
ANNUAL REPORT
1999

DOCUMENT # 724154

1. Corporation Name

ALIKI MANAGEMENT ASSOCIATION, INC. THE

Principal Place of Business
2828 NO. ATLANTIC AVENUE
DAYTONA BEACH FL 32118

Mailing Address
2828 NO. ATLANTIC AVENUE
DAYTONA BEACH FL 32118



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

08/21/1972

4. FEI Number

59-1464650

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

9. Name and Address of Current Registered Agent

MR. JIM MANNING
2828 N. ATLANTIC AVE. #1102
DAYTONA BCH. FL 32118

10. Name and Address of New Registered Agent

81 Name **James W Elsey**
82 Street Address (P.O. Box Number is Not Acceptable)
2828 N Atlantic Ave
83
84 City **Daytona Beach** FL 85 Zip Code **32118**

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 *James W Elsey* **James W Elsey** President **1-4-99**
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	P	☒ DELETE
NAME	JIM MANNING	
STREET ADDRESS	2828 N. ATLANTIC AVE.	
CITY-ST-ZIP	DAYTONA BCH. FL 32118	
TITLE	AP	☒ DELETE
NAME	JAMES CECERE	
STREET ADDRESS	2828 N ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BCH FL	
TITLE	S	☒ DELETE
NAME	MARLA RAWNSLEY	
STREET ADDRESS	2828 N ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE	T	☒ DELETE
NAME	MIKE PLUG	
STREET ADDRESS	2828 N ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BCH FL 32118	
TITLE	D	☒ DELETE
NAME	DR. J. CECERE	
STREET ADDRESS	2828 N ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BCH FL 32118	
TITLE	D	☒ DELETE
NAME	MEL DANKER	
STREET ADDRESS	2828 N ATLANTIC AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	James W Elsey	
1.3 STREET ADDRESS	2828 N Atlantic Ave	
1.4 CITY-ST-ZIP	Daytona Beach FL 32118	
2.1 TITLE	V President	☒ Change ☐ Addition
2.2 NAME	Mike Plug	
2.3 STREET ADDRESS	2828 N Atlantic Ave	
2.4 CITY-ST-ZIP	Daytona Beach FL 32118	
3.1 TITLE	Secretary	☒ Change ☐ Addition
3.2 NAME	John Scheuermann	
3.3 STREET ADDRESS	2828 N Atlantic Ave	
3.4 CITY-ST-ZIP	Daytona Beach FL 32118	
4.1 TITLE	Treasurer	☒ Change ☐ Addition
4.2 NAME	Laura Jackson	
4.3 STREET ADDRESS	2828 N Atlantic Ave	
4.4 CITY-ST-ZIP	Daytona Beach FL 32118	
5.1 TITLE	Director	☒ Change ☐ Addition
5.2 NAME	Marla Rawnsley	
5.3 STREET ADDRESS	2828 N Atlantic Ave	
5.4 CITY-ST-ZIP	Daytona Beach FL 32118	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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, with all other like empowered.

SIGNATURE: *James W Elsey* **James W Elsey** President **1-4-99** **94-672-4111**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (11/98)