FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

737450

(7)

DOMESTIC ABUSE COUNCIL OF VOLUSIA COUNTY, INC.

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Jul	16	1998	8:00am
S	ecr	etary	of State

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Principal Place of Business Mailing Address 211 N. RIDGEWOOD AVE P.O. BOX 142 STE. 301 DAYTONA BEACH FL 32114 US Mailing Address P.O. BOX 142 DAYTONA BEACH FL 32115 US				ı addırı idadd tişte İdbel dibili döti dibil dil	DIL BIBLA BIBLE BEBEL BEBIL DEBI		
		DAYTONA BEACH FL 32115			3. Date Incorporated or Qualified 12/07/1976 4. FEI Number Applied For		
9	Principal Place of Business	On Marillan Adalasa			59-1881222	Not Applicable	
1	Frincipal Flace of ousliess	2a. Mailing Address 26			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	~~ `		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State		City & State	<u> </u>				
23		28	~~ ~		7. Is this nonprofit corporation a homeowners association?		
24	Zip Country 25	Zip 3	Countr 30	у	This corporation owes or has paid the cur Personal Property Tax due June 30.	rent year Intangible Yes 🙀 No	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
	WARDEN MARY FOAMORO		81	Name			
1224 SOUTH PENINSULA, #323		82	Street Address (P.O. Box Number is Not Acceptable) 33				
		63					
	:		84	City	FL	85 Zip Code	
				·		_ 1	

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.

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 DIRECTO		13.	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	S IN 12			
TITLE	PD	X DELETE	1.1 TITLE	PD	☐ Change	X Addition			
NAME	QUINN, ALMA		1.2 NAME	BRENEMAN, DENISE					
STREET ADDRESS	1210 OCEAN SHORE BLVD.		1.3 STREET ADDRESS	211 N. RIDGEWOOD AVE.,	STE.3	01			
CITY-ST-ZIP	ORMOND BEACH FL		1.4 CITY-ST-ZIP	DAYTONA BEACH, FL 321					
TITLE	VO	X DELETE	2.1 TITLE	VD	☐ Change	X Addition			
NAME	B RENEMAN, DENISE		2.2 NAME	WALL, REBECCA					
STREET ADDRESS	211 N. RIDGEWOOD AVE, STE. 301		2.3 STREET ADDRESS	1110 LOOMIS AVE					
CITY-ST-ZIP	DAYTONA BEACH FL		2.4 CITY-ST-ZIP	DAYTONA BEACH, FL 321	14				
TITLE		DELETE	3.1 TITLE	TD	☐ Change	Addition			
NAME	Ö REES, CATHERINE E		3.2 NAME	WELCH, GINA					
STREET ADDRESS	47 BERKLEY ROAD		3.3 STREET ADDRESS	FIRST UNION, 444 SEABR	EEZE B	LVD			
CITY-ST-ZIP	ORMOND BEACH FL		3.4. CITY-ST-ZIP	DAYTONA BEACH, FL 321		_ •			
TITLE		DELETE	4.1 TITLE	SD	Change	Addition			
NAME	ŞMTIH, GLEN		4, 2 NAME	DRAIS, NANCY					
STREET ADDRESS	(90 Orange ave.		4.3 STREET ADDRESS	281 BRAEBURN CIR					
CITY-ST-ZIP	QAYTONA BEACH FL		4.4 CITY-ST-ZIP	DAYTONA BEACH, FL 321	1.4				
TITLE	CEO	DELETE	5.1 TITLE		Change	Addition			
NAME	Warren, Mary Francis		5.2 NAME						
STREET ADDRESS	1224 S. PENINSULA #323		5.3 STREET ADDRESS						
CITY-\$T-ZIP	DAYTONA BEACH FL		5.4 CHTY- ST-ZIP						
TITLE	SD	DELETE	6.1 TITLE	VD	Change	Addition			
NAME	WALL, REBECCA		6.2 NAME	HAMILTON, DORA					
STREET ADDRESS	1110 LOOMIS AVE		6.3 STREET ADDRESS	37 TREETOP CIRCLE					
1	MAUTONIA DELOGICEI				_				

14. Thereby 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.

6-23-68

HZE037 (10/97)