## 2004 NOT-FOR-PROFIT CORPORATION

## Mar 18, 2004 8:00 am **ANNUAL REPORT Secretary of State DOCUMENT #737450** 03-18-2004 90013 034 \*\*\*\*61.25 DOMESTIC ABUSE COUNCIL OF VOLUSIA COUNTY, Principal Place of Business Mailing Address 44018917 P.O. BOX 142 1031 S. BEACH STREET DAYTONA BEACH, FL 32115 DAYTONA BEACH, FL 32114 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 02132004 Chq-NP CR2E037 (10/03) 4. FEI Number Applied For City & State City & State 59-1881222 Not Applicable \$8.75 Additional Country Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent WARREN, MARY FRANCES Street Address (P.O. Box Number is Not Acceptable) 1224 SOUTH PENINSULA, #323 DAYTONA BEACH, FL 32118 Zip Code City FL 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable ್ಕಾ ಪರ್ವಿಚಿತ್ರಕಾಹಿ**DATE** ಅಗಾಗಿ ಚಿನಾಗ (NOTE: Registered Agent signature required when reinstating) '3, 🕖 💥 Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Added to Fees Due by May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Delete Change ■ Addition TITLE TITLE ELLIS, SANDRA . . . . . NAME NAME Pearsall, Ted STREET ADDRESS STREET ADDRESS 510 OAKRIDGE BLVD. 90 Orange Avenue DAYTONA BEACH, FL 321183973 CITY-ST-ZIP CITY-ST-ZIP Daytona Beach, FL 32114 1VPD 1VPD ☐ Change **X**Addition TITLE ☐ Detete TITLE Cobb, Sheri NAME PEARSALL, TED NAME 990 ORANGE AVENUE STREET ADDRESS 3398 Glenshane Way STREET ADDRESS CITY-ST-ZIP DAYTONA BEACH, FL 32114 CITY-ST-ZIP Ormond Beach, FL 32147 2VPD TITLE ☐ Change Addition TITLE **□X**Celete 2VPD NAME SCOTT, HELEN NAME Joeretha Hayes 2430 SO. ATLANTIC AVE., STE. C STREET ADDRESS STREET ADDRESS 801 S. Kottle Circle CITY-ST-ZIP DAYTONA BEACH SHORES, FL 32118 CITY-ST-ZIP Daytona Beach, FL 32114 ☐ Change **X**Addition **□X**belete TITLE TITLE LEWIS, DORA NAME Rebecca Wall NAME STREET ADDRESS STREET ADDRESS 37 TREETOP CIRCLE 444 Seabreeze Blvd. ORMOND BEACH, FL 32117 CITY-ST-ZIP CITY+ST-ZIP Davtona Beach, FL 32118

**FILED** 

☐ Change

\_\_\_\_ Addition

■ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

TITLE

TITLE

NAME STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

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TITLE

NAME

TITLE NAME

STREET ADDRESS

STREET ADDRESS CITY:ST-ZIP

CITY-ST-ZIP

WARREN, MARY FRANCIS

1224 S. PENINSULA #304

DAYTONA BEACH, FL 32118

M.F. Warren . 2/13/04 (386) 257-2297 SIGNATURE: