

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 739104 (8)

1. Corporation Name

THE DAYTONA BEACH BOAT CLUB, INC.



Principal Place of Business

**150 S.PALMETTO AVE
DAYTONA BEACH FL 32114-4320**

Mailing Address

**P. O. BOX 1021
DAYTONA BEACH FL 32115
US**

3. Date Incorporated or Qualified
05/19/1977

3a. Date of Last Report
07/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2835499

Applied For

Not Applicable

22

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

23

6. Election Campaign Financing

☐

**\$5.00 May Be
Added to Fees**

24

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**TUMBLESON, J. DOYLE
150 S.PALMETTO AVE
DAYTONA BEACH FL 32118**

81 Name

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

83

84 City

FL

85 Zip Code

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 re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	☒ DELETE
NAME	JONES, DONALD	
STREET ADDRESS	100 SILVER BEACH AVE., #128	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	SD	☒ DELETE
NAME	SELIS, EILEEN	
STREET ADDRESS	134 DIANNE DRIVE	
CITY-ST-ZIP	ORMOND BEACH FL	
TITLE	TD	☐ DELETE
NAME	MCKAY, DAVID C.	
STREET ADDRESS	840 CHICKADEE DRIVE	
CITY-ST-ZIP	PT ORANGE FL	
TITLE	D	☐ DELETE
NAME	WILLIAMSON, TRUDY	
STREET ADDRESS	128 CYPRESS POND RD.	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	D	☒ DELETE
NAME	CANNONS, BILL C	
STREET ADDRESS	556 N BEACH ST	
CITY-ST-ZIP	DAYTONA BEACH FL	
TITLE	P	☒ DELETE
NAME	CRXHTON, RICHARD	
STREET ADDRESS	103 CUNNINGHAM DR	
CITY-ST-ZIP	NEW SMYRNA BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☒ Change ☒ Addition
1.2 NAME	JAMES THALHEIMER
1.3 STREET ADDRESS	203 COUNTRY CLUB DRIVE
1.4 CITY-ST-ZIP	ORMOND BEACH, FL 32176
2.1 TITLE	☐ Change ☒ Addition
2.2 NAME	ANN DUNSWORTH
2.3 STREET ADDRESS	79 JAMESTOWN DR
2.4 CITY-ST-ZIP	ORMOND BEACH, FL 32176
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	P
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☒ Addition
5.2 NAME	WILLIAM FRICKE
5.3 STREET ADDRESS	116 WILLOW BEACH LN.
5.4 CITY-ST-ZIP	ORMOND BEACH, FL 32174
6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	DORIS KLINDT
6.3 STREET ADDRESS	121 JAMESTOWN DR,
6.4 CITY-ST-ZIP	ORMOND BEACH, FL 32176

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE:

DAVID C. MCKAY

4-15-96

756-1837

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone #

CR2E037 (12/95)