# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Feb 07, 2007 8:00 am**
**Secretary of State**
02-07-2007 90051 028 ****61.25

DOCUMENT # 739104

1. Entity Name
THE DAYTONA BEACH BOAT CLUB, INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 419 BASIN STREET<br>DAYTONA BEACH, FL 32114 | C/O L FUNK<br>3386 JOHN ANDERSON DR.<br>ORMOND BEACH, FL 32176 US |

**DO NOT WRITE IN THIS SPACE**

01182007 No Chg-NP CR2E037 (4/06)

4. FEI Number
59-2835499
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

FUNK, LAWRENCE F
3386 JOHN ANDERSON DR.
ORMOND BEACH, FL 32176

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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 the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $61.25**
**Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | VPD |
| NAME | ZIMMERMAN, GARY |
| STREET ADDRESS | 3636 ARAN CIRCLE |
| CITY-ST-ZIP | ORMOND BEACH, FL 32174 |

VPD Roger Scott
262 So. S.R. 415
New Smyrna Beach, FL 32168

| | |
|---|---|
| TITLE | PD |
| NAME | SMITH, DAVE |
| STREET ADDRESS | 621 MARINA POINT DR. |
| CITY-ST-ZIP | DAYTONA BEACH, FL 32114 |

| | |
|---|---|
| TITLE | SD |
| NAME | POWELL, BEVERLY |
| STREET ADDRESS | 1501 CANARY ST |
| CITY-ST-ZIP | LONGWOOD, FL 32750 |

SD
MARY BLAKE
2255 ORIOLE LANE
South Daytona, FL 32119

| | |
|---|---|
| TITLE | TD |
| NAME | FUNK, LAWRENCE F |
| STREET ADDRESS | 3386 JOHN ANDERSON DR. |
| CITY-ST-ZIP | ORMOND BEACH, FL 32176 |

| | |
|---|---|
| TITLE | VPD |
| NAME | FRICKE, BILL |
| STREET ADDRESS | 57 MAPLE IN THE WOOD |
| CITY-ST-ZIP | PORT ORANGE, FL 32129 |

| | |
|---|---|
| TITLE | PD |
| NAME | BELLAPIANTA, MARC |
| STREET ADDRESS | 87 COLCHESTER LANE |
| CITY-ST-ZIP | PALM COAST, FL 32137 |

PD
Wayne Bowden
108 Sand Dunes Dr.
Ormond Beach, FL 32176

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

**SIGNATURE:** Lawrence F. Funk, Treasurer 1-20-07 386-441-0220
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

LAWRENCE F. FUNK