

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 28, 2008 8:00 am
Secretary of State

02-28-2008 90020 011 ****61.25

DOCUMENT # 739104

1. Entity Name

THE DAYTONA BEACH BOAT CLUB, INC.



Principal Place of Business

419 BASIN STREET
DAYTONA BEACH FL 32114

Mailing Address

C/O L FUNK
3386 JOHN ANDERSON DR.
ORMOND BEACH FL 32176
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/07)

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

7. Name and Address of New Registered Agent

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

Name

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

City

FL

Zip Code

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

(NOTE: Registered Agent signature required when registering)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VPD
NAME SCOTT, ROGER ☒ Delete
STREET ADDRESS 262 SOUTH SR 415
CITY-ST-ZIP NEW SMYRNA BEACH FL 32168

TITLE VIRGINIA JULIANO ☐ Change ☒ Addition
NAME 20 STONEY RIDGE
STREET ADDRESS ORMOND BEACH, FL 32174 SD
CITY-ST-ZIP

TITLE ~~VPD~~
NAME SMITH, DAVE ☐ Delete
STREET ADDRESS 621 MARINA POINT DR.
CITY-ST-ZIP DAYTONA BEACH FL 32114

TITLE VD ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE SD ☒ Delete
NAME BLAKE, MARY
STREET ADDRESS 2255 ORIOLE LN
CITY-ST-ZIP SOUTH DAYTONA BEACH FL 32119

TITLE THOMAS HENRY ☐ Change ☒ Addition
NAME 3 WAINBUSH PLACE
STREET ADDRESS PALM COAST, FL 32164 VD
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE PD ☐ Delete
NAME BOWDEN, WAYNE
STREET ADDRESS 108 SAND DUNES DR
CITY-ST-ZIP ORMOND BEACH FL 32176

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 LAWRENCE F. FUNK

2-10-08 386-441-0220