

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 753300

FILED
Jul 27, 2005
Secretary of State

Entity Name: DAYTONA BEACH STREET RODS, INC.

Current Principal Place of Business:

2050 BRIAN AVENUE
SOUTH DAYTONA, FL 321192749

New Principal Place of Business:

Current Mailing Address:

31309 SOARING HAWK LN
SORRENTO, FL 32776 US

New Mailing Address:

FEI Number: 59-2956698 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SARJEANT, STUART
2413 BELLEVUE AVENUE
DAYTONA BEACH, FL 32014 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ALLISON, THOMAS J
Address: 150 KENT DRIVE
City-St-Zip: ORMOND BEACH, FL

Title: TD () Delete
Name: STAFFORD, CAROL,
Address: 31309 SOARING HAWK LN
City-St-Zip: SORRENTO, FL 32776

Title: D () Delete
Name: SARJEANT, STUART,
Address: 1775 ROSCOE TURNER TRAIL
City-St-Zip: DAYTONA BEACH, FL 32128

Title: PD () Delete
Name: VANLANCKER, L J
Address: 15 N. ST. ANDREWS DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CAROL L. STAFFORD

TD

07/27/2005

Electronic Signature of Signing Officer or Director

Date