

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759397

FILED  
Jun 22, 2009  
Secretary of State

**Entity Name:** VOLUSIA COUNTY TRUSTS AND ESTATES COUNCIL, INC.

**Current Principal Place of Business:**

150 MAGNOLIA AVE.  
DAYTONA BEACH, FL 32018

**New Principal Place of Business:**

1238 RIDGEWOOD AVENUE  
HOLLY HILL, FL 32117 US

**Current Mailing Address:**

ATTN: MICHAEL OLIVARI  
P.O. BOX 2491  
DAYTONA BEACH, FL 321152491

**New Mailing Address:**

C/O JAMES F WOODWARD, CPA  
1238 RIDGEWOOD AVENUE  
HOLLY HILL, FL 32117 US

**FEI Number:** 59-2062603 **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:**

PALMETTO CHARTER SERVICES, INC.  
150 MAGNOLIA AVENUE  
DAYTONA BEACH, FL 32114 US

**Name and Address of New Registered Agent:**

WOODWARD, JAMES F CPA  
1238 RIDGEWOOD AVENUE  
HOLLY HILL, FL 32117-272 US

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: JAMES F WOODWARD

06/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VP ( ) Delete  
Name: OLIVARI, MICHAEL  
Address: 150 MAGNOLIA AVENUE  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: PD ( ) Delete  
Name: BARBER, GLENN  
Address: 303 N CLYDE MORRIS BLVD  
City-St-Zip: DAYTONA BEACH, FL 32120

Title: SD ( ) Delete  
Name: MOORE, SUSAN  
Address: 1219 DUNN AVE.  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: D ( ) Delete  
Name: EMERSON, DICK  
Address: 1020 INT'L SPEEDWAY BLVD.  
City-St-Zip: DAYTONA BEACH, FL 32114

Title: TD ( ) Delete  
Name: WOODWARD, JAMES  
Address: 1238 RIDGEWOOD AVENUE  
City-St-Zip: HOLLY HILL, FL 321172722

Title: D ( ) Delete  
Name: SHIERLING, GEORGE  
Address: 228 W NEW YORK AVENUE  
City-St-Zip: DELAND, FL 32720

**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:

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 exemption stated 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 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: JAMES F WOODWARD

TD

06/22/2009

Electronic Signature of Signing Officer or Director

Date