


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 10, 2007 08:00 AM
Secretary of State

DOCUMENT # 759638 1. Entity Name DAYTONA RESORT & CLUB ASSOCIATION, INC.	
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Principal Place of Business 1200 RUGER PL DAYTONA BCH, FL 32118 US	Mailing Address 1200 RUGER PL DAYTONA BEACH, FL 32118 US
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DO NOT WRITE IN THIS SPACE



07022007 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-2071303	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BILINSKI, EDWARD J 559 EAST ORANGE ST ALTAMONTE SPRINGS, FL 32701

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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 <i>Edward J Bilinski</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>	DATE <i>7-3-07</i> <small>(NOTE: Registered Agent signature required when reinstating)</small>

Filing Fee is \$61.25 Due by September 14, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIERCE, JEAN 661 SE PORTAGE PORT ST. LUCIE, FL 34984
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MOSS, BRIAN 2315 LAUDERDALE CT. ORLANDO, FL 32805
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SANTILLI, PETER 12960 CURT DR JACKSONVILLE, FL 32701
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARAVELLO, DONALD 2200 N A1A SUITE 601 DAYTONA BEACH, FL 32118
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SMITH, JOYCE 523 BALASWOOD COURT ALTAMONTE SPRINGS, FL 32714
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S EDMONDSON, JAY 2274 LAKE POINT CIR LEESBURG, FL 34748

<p>U00000767731 07/10/07-80017-005 61.25</p> <p>DO NOT WRITE IN THIS SPACE</p>

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: <i>Edward J Bilinski</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <i>7-3-07</i> <i>386-255-0764</i> <small>Daytime Phone #</small>