

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 24, 1999 8:00 am
Secretary of State

02-24-1999 90097 020 ***150.00

DOCUMENT # F96000006319

1. Corporation Name
DAYTONA G.P., INC.

Principal Place of Business
**5 PIEDMONT CTR #750
ATLANTA GA 30305**

Mailing Address
**5 PIEDMONT CTR #750
ATLANTA GA 30305**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1996

4. FEI Number

58-2270195

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HUMPHRIES, J GREGORY
201 E PINE ST #701
ORLANDO FL 32801**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DCP
NAME SCOTHORN, STEWART D
STREET ADDRESS 1853 E. PIEDMONT RD., STE. 300
CITY-ST-ZIP MARIETTA GA ☐ DELETE

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 1853 Piedmont Rd., Terrace Level
1.4 CITY-ST-ZIP Marietta, GA 30066

TITLE VS
NAME BLANTON, GLYNDA D
STREET ADDRESS 1853 E. PIEDMONT RD., STE. 300
CITY-ST-ZIP MARIETTA GA ☐ DELETE

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 1853 Piedmont Road, Terrace Level
2.4 CITY-ST-ZIP Marietta, GA 30066

TITLE DVS
NAME MARTIN, J MARSHALL III
STREET ADDRESS 5 PIEDMONT CTR #750
CITY-ST-ZIP ATLANTA GA 30305 ☐ DELETE

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D
NAME BURGE, DAN E
STREET ADDRESS 1744 ROSWELL RD
CITY-ST-ZIP MARIETTA GA 30062 ☐ DELETE

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE S
NAME POTTORFF, DONNA W
STREET ADDRESS 5 PIEDMONT CTR #750
CITY-ST-ZIP ATLANTA GA 30305 ☒ DELETE

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE

Glynda Blanton
Glynda Blanton, Executive Vice President.

February 10, 1999 (770) 565-8200

Date

Daytime Phone #

CR2E034 (1/98)