

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# J34083

**FILED**  
**Apr 05, 2010**  
**Secretary of State**

**Entity Name:** RESORT MARKETING CONSULTANTS OF VOLUSIA COUNTY, INC.

**Current Principal Place of Business:**

407 FLAGLER AVE.  
NEW SMYRNA BEACH, FL 32169

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2092  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

6986 SOUTH ATLANTIC AVENUE  
NEW SMYRNA BEACH, FL 32169

**FEI Number:** 27-1741982

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

KOSMAS, NICHOLAS G  
6986 S. ATLANTIC AVE.  
NEW SMYRNA BEACH, FL 32169 US

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

BRUCELLARIA, ANGELLA Y  
6986 S. ATLANTIC AVE.  
NEW SMYRNA BEACH, FL 32169 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: ANGELLA KOSMAS-BRUCELLARIA

04/05/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: BRUCELLARIA, ANGELLA Y  
Address: 6986 SOUTH ATLANTIC AVENUE  
City-St-Zip: NEW SMYRNA BEACH, FL 321769

Title: AD  
Name: BRUCELLARIA, JOHN E  
Address: 6986 SOUTH ATLANTIC AVE.  
City-St-Zip: NEW SMYRNA BEACH, FL 32169

I hereby 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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ANGELLA KOSMAS BRUCELLARIA

PD

04/05/2010

Electronic Signature of Signing Officer or Director

Date