## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

J93865

(0)

DAY	iona dash distributor:	S, INC.		1101110 212 1991 1991 1991 1991 1	
Principal Place of Business Mailing Address					D    D
135 MARION STREET 1171 NORTH HALIFA DAYTONA BEACH FL 32114 DAYTONA BEACH FL US					
				<ol> <li>Date Incorporated or Qualified 09/21/1987</li> </ol>	3a. Date of Last Report 01/31/1995
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 26			59-1737363	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	-1.	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25  9. Name and Address of Curren	t Boolstored Agent	30	Florida Statutes Yes	
	5. Haile and Address of Culter	t negistered Agent	81 Name	10. Name and Address of New Re	gistered Agent
0040	W DOMAID !		Name .		
SPARBY, DONALD I 1171 N HALIFAX AVE			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)	
DAYTONA BEACH FL 32118		83			
			<b>84</b> City		FL 85 Zip Code
11. Pursuant to or registere familiar with	o the provisions of Sections 607.0502 ed agent, or both, in the State of Floric	and 607.1508, Florida Statu la. Such change was author	ites, the above-named corporated by the corporation's boa	oration submits this statement for the purp and of directors. I hereby accept the appoin	pose of changing its registered office intment as registered agent. I am
	n, and acceptane obligations of, Section	07 607.0505, Fjorida Statute	2) ~~ 4		11/00/01
SIGNATURE _	Signature, typed or printed name of registered about	ar Title if applicable (N	IOTE: Registered Agent signature require	D S/AKB9	DATE 7/21/76
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DPCT	☐ DELETE	1. 1 TITLE		Change Addition
NAME	Sparby, Donald IL		1.2 NAME		
S'REET ADDRESS	***************************************		1.3 STREET ADDRESS		
CITY - ST - ZIP	DAYTONA BEACH FL		1.4 CITY-ST-ZIP		
TITLE	SD	□ DELETE	2.1 TITLE		Change Addition
NAME	SPARBY, BARBARA L.		2.2 NAME		
STREET ADDRESS	*** **********************************		2.3 STREET ADDRESS		
CITY ST-ZIP	DAYTONA BEACH 32		2.4 CITY-ST-ZIP		
1ITLE		☐ DELETE	3. 1 TITLE		☐ Change ☐ Addition
MAME			3.2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY-S1-ZIP			3 4 CITY-ST-ZIP		
TITLE		☐ DEFELE	4. 1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TI*LF		☐ DELETE	5. 1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP		F never	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6 1 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP	certify that the information supplied	ith this filips is unlimbed.	64 CITY-ST-ZIP		
certify that	the information indicated on this annu-	not one ming is voluntarily fur all record or europlemental ac-	maned and does not quality t	or the exemption stated in Section 119.0	r(3)(k), Florida Statutes. I further

oath; that I am an officer or director of the corporation or the receiver or trusteepenpowered 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

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICE

(904)255-1683