2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 13, 2006 08:00 AM
Secretary of State

DOCUMENT # L20907

1. Entity Name

DAYTONA TROPHY, INC.

Principal Place of Business	Mailing Address
2413 BELLEVUE AVE DAYTONA BEACH FL 32114	2413 BELLEVUE AVE DAYTONA BEACH FL 32114

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E034 (10/05)

4. FEI Number 59-2977913 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SARJEANT, JAMES A 2614 SPRUCE CREEK BLVD DAYTONA BEACH FL 32128	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

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 _____ DATE _____
Signature of or name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2006 Fee Will Be $550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	P ☐ Delete	TITLE	☐ Change ☐ Add
NAME	SARJEANT, STUART A.	NAME	U00000506808
STREET ADDRESS	1775 ROSCOE TURNER TRAIL	STREET ADDRESS	04/27/06-80038-011 150.00
CITY-ST-ZIP	DAYTONA BEACH FL 32128	CITY-ST-ZIP	
TITLE	V ☐ Delete	TITLE	☐ Change ☐ Add
NAME	SARJEANT, RACHEL L.	NAME	
STREET ADDRESS	1775 ROSCOE TURNER TRAIL	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32128	CITY-ST-ZIP	
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Add
NAME	SARJEANT, CATHERINE E.	NAME	
STREET ADDRESS	3235 VAIL VIEW DR	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32128	CITY-ST-ZIP	
TITLE	T ☐ Delete	TITLE	☐ Change ☐ Add
NAME	SARJEANT, JAMES A	NAME	
STREET ADDRESS	2614 SPRUCE CREEK BLVD	STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL 32128	CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	
TITLE	☐ Delete	TITLE	☐ Change ☐ Add
NAME		NAME	
STREET ADDRESS		STREET ADDRESS	
CITY-ST-ZIP		CITY-ST-ZIP	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 607, 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: _____ 04/10/06 386-253-2806
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #