

2008 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90025 036 ***158.75

DOCUMENT # L92820

1. Entity Name

TOUR ICE OF DAYTONA, INC.



Principal Place of Business

635 NORTH BEACH STREET
DAYTONA BEACH FL 32114-2215

Mailing Address

635 NORTH BEACH STREET
DAYTONA BEACH FL 32114-2215



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/07)

City & State

City & State

4. FEI Number

59-3023264

Applied For

Not Applicable

Zip

Country

Zip

Country

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

PRICE, SHERRY L
1008 INDIAN OAKS W.
HOLLY HILL FL 32117

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

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

(NOTE: Registered Agent signature required when forwarding)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 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
NAME	PRICE, SHERRY L	
STREET ADDRESS	1008 INDIAN OAKS W.	
CITY-ST-ZIP	DAYTONA BEACH FL 32117	
TITLE	TS	☐ Delete
NAME	PRICE, BRAD R	
STREET ADDRESS	1008 INDIAN OAKS W	
CITY-ST-ZIP	DAYTONA BEACH FL 32117	
TITLE	VP	☐ Delete
NAME	RUKEN, BILL	
STREET ADDRESS	335 RIBUALT AVE	
CITY-ST-ZIP	DAYTONA BEACH FL 32118	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Treasurer	☒ Change ☐ Addition
NAME	Price, Brad R.	
STREET ADDRESS	1008 Indian Oaks W.	
CITY-ST-ZIP	Daytona, Fla. 32117	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Secretary	☐ Change ☒ Addition
NAME	Richard B. Price	
STREET ADDRESS	1008 Indian Oaks W.	
CITY-ST-ZIP	Daytona, Fla. 32117	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
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:

Sherry L. Price

Sherry L. Price

3-3-08

386-253-7712

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #