

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 17, 2002 8:00 am
Secretary of State

04-17-2002 90025 022 ****50.00

DOCUMENT # L98000000823

1. Entity Name

DAYTONA INN, L.C.

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2101 John Anderson Dr.

Suite, Apt. #, etc.

3. Mailing Address

2101 John Anderson Dr.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Ormond Beach, FL

Zip

Country

32176 U.S.

City & State

Ormond Beach, FL

Zip

Country

32176 U.S.

4. FEI Number

59-3516381

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

John A. Rainey

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

2101 John Anderson Dr.

City

Ormond Beach

FL

Zip Code

32176

**DO NOT WRITE
IN THIS SPACE**

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.

SIGNATURE

Christa Rainey

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

04/08/02

DATE

FEE IS \$50.00

**Make Check Payable to Department of State
DUE BY MAY 1**

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME

MGR
Rainey, John A.
2101 John Anderson Dr.
Ormond Beach, FL 32176

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME

MGR
BIRDMAN, Harvey
307 South 21st Ave.
Hollywood, FL 33020

TITLE
NAME

STREET ADDRESS
CITY-ST-ZIP

TITLE
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

1. 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 report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE:

Christa Rainey

04/08/02 (386) 258-2860

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

CR2E083B (12/01)